

Physical Education Activity Log

This form is for make-ups.

Name _____

Period _____

Date	Fitness Activity	Minutes	Heart Rate	Parents Initials

How to use this form:

Date: Please mark the date(s) that you were active. These times need to be before or after school. After school sports can be used but are **not** to take the place of the physical education curriculum.

Fitness Activity: List the Activity. (I.E. Football, Wrestling, Trampoline, Running, Bike riding, snowboarding, rollerblading, etc.)

Minutes: Amount of time actually active. (Riding the chair-lift while snowboarding does not Count.) **(Complete 30min of aerobic activity for each absence or no-dress day!)**

Heart Rate: Find carotid artery. Make sure you can feel pulse. Count for six(6) seconds and add a zero to the number you get. (I.E. You count 16 times in 6 seconds; your pulse is 160)

Parent Initials: Please initial for confirmation.

REMINDER: There are only a certain number of make-ups a person can have each quarter!