

Name: \_\_\_\_\_

## PHYS ED AT HOME

**Directions:** Have a parent/guardian sign/initial each activity that you complete. Try and complete the entire challenge.

_____ Jog for 5 minutes	_____ 20 sit ups	_____ Make a snow castle
_____ Eat 3 veggies in 1 day	_____ Dance 10 minutes	_____ Leg Raises x 25
_____ 15 burpees	_____ 60 second wall sit	_____ 10 burpees
_____ Walk with a family member	_____ Play tag for 10 minutes	_____ 50 jumping jacks
_____ Climb stairs 10 times	_____ Plank for 25 seconds x2	_____ Imaginary jump rope x 100
_____ 30 seconds high knees	_____ 20 squats x 3	_____ Choice exercise x 25
_____ Check heart rate each day	_____ 25 Step ups x 3	_____ Strengtathlon 10 minutes
_____ 20 lunges x 3	_____ 10-20 minutes walking	_____ Strengtathlon 15 minutes
_____ 5 minute stretch	_____ Eat 2 pieces of fruit	_____ Strengtathlon 20 minutes
_____ Exercise during every commercial of your favourite show	_____ Shovel the sidewalk	_____ Strengtathlon 25 minutes

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