

HEALTH WEEK BINGO

Student Name _____ Teacher / Grade _____

RULES:

Complete the activities listed in the boxes below.

Fill in the boxes to complete an entire row either horizontally, vertically or diagonally.

Individual physical activities listed below can be completed at home or school (where applicable), and must be participated in for a MINIMUM OF 20 MINUTES.

Have a parent / caregiver sign at the bottom.

Turn in to the office by recess on FRIDAY MARCH 29, 2019 to be entered into a drawing at the end of the day to win PRIZES!

NO LATE SUBMISSIONS ACCEPTED!

***EXTRA CHALLENGE- IF YOU ARE INTERESTED IN BEING ENTERED IN A DRAWING FOR EXTRA SPECIAL PRIZES, PLEASE SEE ATTACHED PAPER AND COMPLETE THE EXTRA CHALLENGE.**

TEAM SPORTS	WALK THE DOG	DRINK WATER	FLOSS & BRUSH TEETH	NO JUNK FOOD DAY	KICK THE SOCCER BALL
PLAY TAG	SHOOT HOOPS	EAT VEGETABLES	NO VIDEO GAMES DAY	EAT FRUIT	RIDE BIKE
TRY NEW FRUIT	PLAY OUTSIDE	WALK TO SCHOOL	JUMP ROPE	CLIMB JUNGLE GYM	NO JUICE DAY
NO SODA DAY	RUN	RIDE SCOOTER	DO JUMPING JACKS	HELP IN THE YARD	TRY NEW VEGETABLE
HIKE	EAT WHOLE GRAINS	SLEEP 10 HOURS	GO TO THE PARK	DANCE	PLAY HANDBALL
PLAY TETHERBALL	THROW THE FOOTBALL	PLAY FRISBEE	NO TV	TAKE MY VITAMINS	NO CANDY DAY

Parent / Caregiver _____