

Name \_\_\_\_\_

## COVID Asynchronous Physical Education (Mr. Kaiser)

	Activity	Which one did you do? Circle or fill in the blank.			How was it? Did you like it? Would you do it again? Give me some feedback.	Date	Parent Initials
Day/Activity #1	Walk, Jog, or Ride	1/2 mile Jog	1 mile Walk	2 mile Bike			
Day/Activity #2	Yoga	Tension release	Short, sweet, & sweaty	Primal functions			
Day/Activity #3	DAREBEE (your choice)						
Day/Activity #4	YouTube Workout	Full body	Cardio HIIT	Full body #2			
Day/Activity #5	20 minute activity	What did you do?					

You can do these activities in any order as long as you do one activity for each day you miss class.

Bring this log sheet back to Mr. Kaiser when you return to school.