

Our Family

Get everyone involved ... healthy, active living is for all of us!!

General Information

Person 1 - Name: _____ Student Staff Teacher Other _____

Date Started: _____ Date Ended: _____

Participating as part of:

Class/Grade School Group Other Name of School _____

(Before this pedometer program)/We considered ourselves:

very active moderately active somewhat active inactive

Record your daily steps here

	Person 1	Person 2	Person 3	Person 4
	Age_____	Age_____	Age_____	Age_____
	Gender __	Gender __	Gender __	Gender __
Mon				
Tues				
Wed				
Thurs				
Fri				
Sat				
Sun				
Sub-total				
Mon				
Tues				
Wed				
Thurs				
Fri				
Sat				
Sun				
Sub-total				
Grand Total				

Record your daily steps here

	Person 1	Person 2	Person 3	Person 4
	Age_____	Age_____	Age_____	Age_____
	Gender __	Gender __	Gender __	Gender __
Mon				
Tues				
Wed				
Thurs				
Fri				
Sat				
Sun				
Sub-total				
Mon				
Tues				
Wed				
Thurs				
Fri				
Sat				
Sun				
Sub-total				
Grand Total				

Total Steps/Our Family: _____

Average Steps/Person at Start: _____

Average Steps/Person at End: _____