

Physical Activity— Advanced Tracking Sheet



Team Name _____ Team Captain Name _____ Phone/Email _____

This form should be used by Team Captains to record weekly physical activity minutes for each team member, and turned in to your Program Coordinator at the end of the 10-week program.

Participant Name	Daily Goal (Minutes)	Weekly Goal (Minutes)	Week 1 Minutes	Week 2 Minutes	Week 3 Minutes	Week 4 Minutes	Week 5 Minutes	Reset Goal? No/ New Goal	Week 6 Minutes	Week 7 Minutes	Week 8 Minutes	Week 9 Minutes	Week 10 Minutes	Number of Weeks Goal was Met or Exceeded
1.														
2.														
3.														
4.														
5.														
6.														
7.														
8.														
9.														
10.														

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