

Physical Activity Contract

2017-2018 School Year

In 2008, the Iowa Legislature enacted “The Healthy Kids Act,” requiring all students in grades 7 – 12 engage in physical activity for a minimum of 120 minutes per week in which there are at least five days of school. The law also requires we monitor how students fulfill this requirement.

Please fill out the items below, sign (both student and parent/guardian), and return to the school by **August 23, 2017**. If you have any questions, call Lynell O’Connor at 319-668-1050.

Name of Student: _____ **Grade (2017-2018):** _____

Please check the physical activities your student will be involved in 120 minutes/week during the 2016-2017 school year:

<p>August:</p> <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Cross country <input type="checkbox"/> Football <input type="checkbox"/> Marching Band <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Swimming <input type="checkbox"/> Volleyball <input type="checkbox"/> Other (at home)	<p>September:</p> <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Cross country <input type="checkbox"/> Football <input type="checkbox"/> Marching Band <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming <input type="checkbox"/> Volleyball <input type="checkbox"/> Other (at home)	<p>October:</p> <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Cross country <input type="checkbox"/> Football <input type="checkbox"/> Marching Band <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming <input type="checkbox"/> Volleyball <input type="checkbox"/> Other (at home)	<p>November:</p> <input type="checkbox"/> Basketball <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming (boys) <input type="checkbox"/> Wrestling <input type="checkbox"/> Other (at home)
<p>December:</p> <input type="checkbox"/> Basketball <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming (boys) <input type="checkbox"/> Wrestling <input type="checkbox"/> Other (at home)	<p>January:</p> <input type="checkbox"/> Basketball <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming (boys) <input type="checkbox"/> Track <input type="checkbox"/> Wrestling <input type="checkbox"/> Other (at home)	<p>February:</p> <input type="checkbox"/> Basketball <input type="checkbox"/> Blackout <input type="checkbox"/> Cheerleading <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Swimming (boys) <input type="checkbox"/> Track <input type="checkbox"/> Wrestling <input type="checkbox"/> Other (at home)	<p>March:</p> <input type="checkbox"/> Golf <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Soccer <input type="checkbox"/> Track <input type="checkbox"/> Other (at home)
<p>April:</p> <input type="checkbox"/> Golf <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Show Choir <input type="checkbox"/> Soccer <input type="checkbox"/> Track <input type="checkbox"/> Other (at home)	<p>May:</p> <input type="checkbox"/> Baseball <input type="checkbox"/> Golf <input type="checkbox"/> Off-Season Training <input type="checkbox"/> PE Course <input type="checkbox"/> Soccer <input type="checkbox"/> Softball <input type="checkbox"/> Track <input type="checkbox"/> Other (at home)		

Signature of Student _____

Date Signed: _____

Signature of Parent/Guardian: _____

Signature of Building Principal/Designee: _____