

I COMPLETED THE NO SUGARY DRINKS NOVEMBER CHALLENGE!

FIRST & LAST NAME: _____

GRADE: 2 1 5K 4K PS

CLASSROOM
TEACHER: _____

PLEASE USE FULL LAST NAME OF CLASSROOM TEACHER

RETURN TO MRS. RESCH - PE TEACHER
BY TUESDAY, DECEMBER 3RD

INCENTIVE TBD BASED ON PARTICIPATION

— — > DO IT FOR YOUR HEALTH < — —