




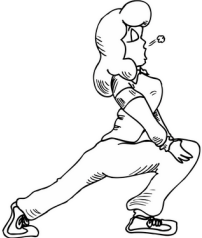


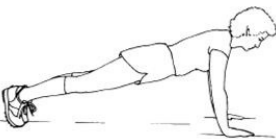



100th DAY OF SCHOOL FITNESS CHALLENGE

10 sit-ups  <input type="checkbox"/>	10 toe touches  <input type="checkbox"/>	10 stretches  <input type="checkbox"/>	10 jumping jacks  <input type="checkbox"/>	10 windmills  <input type="checkbox"/>
10 lunges  <input type="checkbox"/>	10 squats  <input type="checkbox"/>	10 arm raises  <input type="checkbox"/>	10 push-ups  <input type="checkbox"/>	10 jumps  <input type="checkbox"/>

I can do 100 exercises!

Name: _____