\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s fitness Sheet

|  |  |  |
| --- | --- | --- |
| Date | I did laps in 5 minutes | I felt…. |
| / /15 |  | great good ok not so good |
| / /15 |  | great good ok not so good |
| / /15 |  | great good ok not so good |
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