

Name _____ Section _____ Date _____



Lab A7-4 Fitness Activity Evaluation Checklist

Complete the following checklist for each activity you consider for your exercise program. Check the statements that are true, and fill in the other information.

Activity: _____

Fitness components developed: _____

_____ This activity will help me reach my fitness goals.

_____ This activity is fun.

_____ This activity will hold my interest over time.

Describe how to vary the activity: _____

_____ My current skill and fitness level allow me to participate fully in this activity.

_____ I can easily fit this activity into my daily schedule.

Describe how: _____

_____ The facilities, equipment, and other special requirements of this activity are available and affordable.

Requirement

Source/location

_____ This activity conforms to my special health needs.

Describe: _____

Other considerations (describe):