

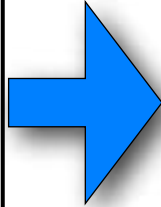
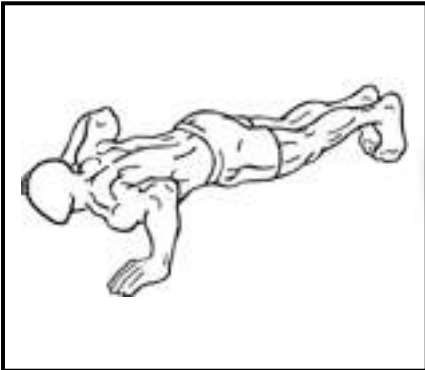
# HEALTH RELATED FITNESS - REFLECTION

YOUR NAME: \_\_\_\_\_

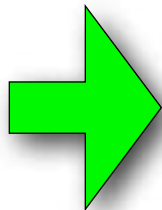
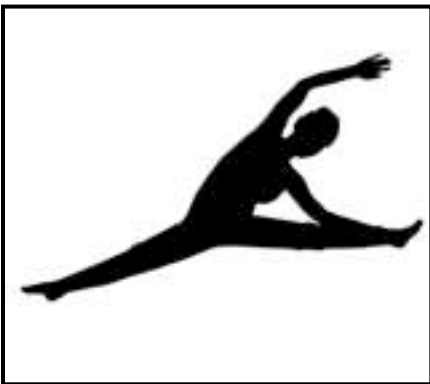
LIST HERE THE KINDS OF ACTIVITIES, EXERCISES OR SPORTS THAT YOU DO (OR COULD DO) **ON YOUR OWN TIME** FOR EACH COMPONENT OF FITNESS.



**CARDIO - RESPIRATORY ENDURANCE**



**MUSCULAR STRENGTH AND  
MUSCULAR ENDURANCE**



**FLEXIBILITY**

WHAT COMPONENT OF FITNESS DO YOU NEED TO IMPROVE THE MOST IN? WHY DO YOU WANT TO IMPROVE THIS?

TELL ME HOW YOU CAN WORK ON THIS? A PLAN.  
(FOR EXAMPLE...DO EXERCISES WHEN YOU WAKE UP FOR 10 MINUTES)



1)

2)