

**Central Kitsap School District**  
**K-5 Physical Education (November 16-20)**

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Classroom Teacher: \_\_\_\_\_

**Directions: Complete each PE activity below and return this form to your school.**

As a family, your task is to do a “Walk and Talk” for 20 minutes twice per week. This is where your family goes out for a walk and talks with each other about a certain topic. Below are the topic choices for each “Walk and Talk” activity. Select one topic (question) for each “Walk and Talk”.

**PE Activity: Walk and Talk #1**

- Why does your heart beat slower when you are resting compared to when you are moving and exercising? What types of exercises can you do to make your heart beat really fast?
- What are some exercises or movements that use your upper leg muscles?


**PE Activity: Walk and Talk #2**

- When the weather becomes windy during the fall, what are some different things that fall down. How can you avoid those things to stay safe?
- While you are walking, count the number of trees you can see. How tall do you think they are? What are the benefits of having trees around us?

**Concept of the Week: The Muscular System**

Another function of the muscular system is blood circulation. Your heart, a type of muscle (cardiac muscle), circulates blood throughout your body through veins and arteries (smooth muscles). Your heart creates electrical impulses that allow your heart to beat. Your skeletal muscles, such as your quadriceps and hamstrings, help your body to move. When you move and exercise, you increase the circulation of blood throughout your body. Circulation is needed to deliver the oxygen and nutrients to your working muscles.

**PE Activity: Log your physical activities, your time, and intensity throughout the week.**

Date	Activities What activities did you do? You may include your “Walk and Talks” as part of your daily activities.  Examples: riding bike, jump rope, running laps around your house, swimming, playing at a park, any type of recreational activities, yard work, house chores, or any other activity that raises heart rate (with parent permission).	Time How much time did you spend doing activity? What was your intensity level?   1      2      3      4
Monday _____		Time: _____ Intensity Level: _____
Tuesday _____		Time: _____ Intensity Level: _____
Wednesday _____		Time: _____ Intensity Level: _____
Thursday _____		Time: _____ Intensity Level: _____
Friday _____		Time: _____ Intensity Level: _____

Please return this form to your school when completed.

