

North Kitsap Vikings P.E. Buy Back Form

NAME _____ CLASS _____ PERIOD _____
DATE _____ DATE OF ABSENCE _____
ACTIVITY: _____ DURATION _____
PARENT/GUARDIAN SIGNATURE _____
WEIGHT ROOM SUPERVISOR'S SIGNATURE _____
FITNESS CENTER SUPERVISOR'S SIGNATURE _____

ACTIVITY CHOICES: All Make ups must be done in the Weight room or the Fitness Center (Mon./ Wed./Fri. 2:30-4:00)
Make-ups not done in the weight room or fitness center, must have instructor approval and must be specific to the offerings of the class.

- 1) Run 12 minutes 2) Bicycle 5 miles 3) Swim 20 minutes 4) Weight room: 45 minute work out
(minimum of 5 lifts @ 3 sets)

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