



4-H CLUB HEALTH ACTIVITY GUIDE: EATING HEALTHY END-OF-YEAR RECORD FORM

HELP US TRACK OUR PROGRESS WITH THE W.VA. 4-H HEALTH H PROGRAM

Please complete the information each month. At the end of the club year, cut out the form and put it in an envelope. **Mail it to your Extension Agent.**

4-H Health Officer Name: _____ Date: _____

County: _____ Club Name: _____

At each club meeting, fill in the information below. Also, please send us comments about the 4-H Health Officer role, *4-H Club Health Activity Guide* and Family Handouts.

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<i>Meeting date</i>	<i>✓ Check activities you did each month</i>	<i>Number of 4-H members</i>	<i>Number of 4-H adult leaders</i>	<i>Number of 4-H family members (parents, siblings)</i>
MONTH #1 My Taste Personality	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			
MONTH #2 6,000 Choices	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			
MONTH #3 Need to Eat Clues	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			

<i>Meeting date</i>	<i>✓ Check activities you did each month</i>	<i>Number of 4-H members</i>	<i>Number of 4-H adult leaders</i>	<i>Number of 4-H family members (parents, siblings)</i>
MONTH #4 Moods and Foods	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			
MONTH #5 "Just Right" Portions	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			
MONTH #6 Fast-food Slowdown	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			
MONTH #7 Your Food Scene	<input type="checkbox"/> Health H Challenge <input type="checkbox"/> Roll Call <input type="checkbox"/> Instant Activity <input type="checkbox"/> Nutritious Snack <input type="checkbox"/> Family Handout			

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