




































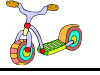














May 16th-20th, 2011

Coulee Region Wheel to School Week Challenge

Circle how you traveled TO school....

Monday (May 16th)	Tuesday (May 17th)	Wednesday (May 18th)	Thursday (May 19th)	Friday (May 20th)
BIKED 	BIKED 	BIKED 	BIKED 	BIKED 
RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 
RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 
ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 
WALKED 	WALKED 	WALKED 	WALKED 	WALKED 

Circle how you traveled home FROM school....

Monday (May 16th)	Tuesday (May 17th)	Wednesday (May 18th)	Thursday (May 19th)	Friday (May 20th)
BIKED 	BIKED 	BIKED 	BIKED 	BIKED 
RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 	RODE A SKATEBOARD 
RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 	RODE A SCOOTER 
ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 	ROLLERBLADED 
WALKED 	WALKED 	WALKED 	WALKED 	WALKED 

Logs are due back by
May 27th, 2011.

Please mail your log to:
Rebecca Lakowske
300 North 4th Street,
2nd Floor Nutrition Services
La Crosse WI, 54601

PLEASE SELCECT A BOX Student Log Staff Log

PRINT NAME (First and Last): _____

PHONE NUMBER OF STAFF OR PARENT/GUARDIAN: _____

SCHOOL: _____

STUDENT AGE _____