

2014-2015 COUNTABLE ATHLETICALLY RELATED ACTIVITIES (CARA)

SPORT _____ MONTH _____

Coach's Signature _____

Date _____

#1 SA's Signature _____

Print Name _____

Date _____

#2 SA's Signature _____

Print Name _____

Date _____

**Week
Totals**

Sunday					Monday					Tuesday					Wednesday					Thursday					Friday					Saturday					Hours?
Date: _____					Date: _____					Date: _____					Date: _____					Date: _____					Date: _____					Date: _____					
Code	In	Out	Total		Code	In	Out	Total		Code	In	Out	Total		Code	In	Out	Total		Code	In	Out	Total		Code	In	Out	Total		Code	In	Out	Total		
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Activity Codes: P = Practice C = Competition (always 3 hours - no times needed) X = Conditioning M = Meeting F = Film

Please circle Y or N if "Individual Skill Instruction" occurred during that particular week; If yes, please include Individual Skill Instruction sheet(s).