

# Hevra Journal Page

First name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Activity: \_\_\_\_\_ Date of activity: \_\_\_\_\_

Who in my family participated: \_\_\_\_\_

\_\_\_\_\_

A description of the activity: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Something I learned at/from the activity:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How my family and I felt about the activity: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Add any additional comments or photos from the activity below: