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University of Arizona

College of Agriculture
Agricultural Extension Service

BOYS' AND GIRLS' CLUB WORK SECOND YEAR 4-H HEALTH CLUB



BY

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BOYS' AND GIRLS' CLUB WORK

Club Emblem

The four leaf clover with an "H" on each leaflet is the National Boys' and Girls' Club emblem. The four "H's" stand for the equal training of the head, heart, and hand, and for health.

Club Pledge

As a true club member I pledge my head to clearer thinking, my heart to greater loyalty, my hands to larger service, and my health to better living for my club, my community, and my country.

Club Motto

Make the Best Better

Club Creed

The Arizona Club creed is: I believe in Boys' and Girls' Club work because of the opportunity it gives me to become a useful citizen.

I believe in the training of my head because of the power it will give me to think, to plan, and to reason.

I believe in the training of my heart because it will help me to be kind, sympathetic, and true.

I believe in the training of my hands because it will make me helpful, skillful, and useful.

I believe in the training for health because of the strength it will give me to enjoy life, to resist disease, and to become efficient.

I believe in the great trinity of club work, the school, the home, and achievement.

I believe in my country, in the State of Arizona, and in my responsibility for their development.

To the fulfillment of all these things I am willing to dedicate my service.

ARIZONA BOYS' AND GIRLS' 4-H CLUB WORK

PLAN OF 4-H HEALTH CLUBS

The 4-H Health Club Work is designed to provide club material for 3 different years. The first year's work deals with the relation of health to growth, the second with the relation of health to the correction of physical defects and the third with the relation of health to personal beauty. The requirements for each year's work are as follows:

REQUIREMENTS FOR 4-H HEALTH CLUBS

Requirements for First Year 4-H Health Clubs

1. Have health inspection and scoring at the beginning and close of the year.
2. Observe food habits and keep Food Habits Record one week at beginning and one week at close of club year.
3. Keep monthly record of weight and height.
4. Learn precautions for safety at play. (Club demonstration, First Aid for rattlesnake bite.)
5. Prepare a poster illustrating some safety precaution or the relation of sleep to health.
6. Make a shadow graph of posture (Elective).
7. Make a print of the feet.
8. Make a paper drinking cup.
9. Make a print of the teeth in wax or paraffin (Elective).
10. Develop proficiency in one set of exercises.
11. Develop proficiency in one stunt (Elective).

Requirements for Second Year 4-H Health Clubs

1. Use second year Health Score at beginning and close of year.
2. Make Record of Personal Defects (from the Health Score) and correct them, entering corrections on record also.
3. Keep Food Habits Score Card one week at beginning and one week at close of year.
4. Make Height-Weight Graph.
5. Develop proficiency in one group of exercises and in exercises for overcoming specific defects.
6. Make two posters to illustrate some phase of safety at home, or posture, or one on each.
7. Make one article as a contribution to group or community health.
8. Take part in a stunt, health play, or demonstration (Elective).

Requirements for Third Year 4-H Health Clubs

1. Have health scored at beginning and close of year.
2. Make a record of personal defects (from the Health Score) and correct them, entering corrections on record also.
3. Make four posters showing the relation of health to beauty on the following subjects:
 - a. Correct footwear
 - b. Conduct
 - c. Personal care
 - d. Some other phase of third year club work. (Club demonstration, correct footwear.)
4. Keep record of care of the skin; (club demonstration, a cleansing facial treatment).
5. Keep record of care of the hair; (club demonstration, shampooing).
6. Keep record of care of the hands; (club demonstration, manicuring).
7. Make a record of five items of conduct learned that affect health and beauty.
8. Give a demonstration in First Aid before the club or at some public gathering.
9. Develop proficiency in one group of exercises.

DETAILED REQUIREMENTS FOR SECOND YEAR 4-H HEALTH CLUBS

REQUIREMENTS FOR ORGANIZATION

1. Duration of the club to be at least 4 months.
2. At least five members enrolled.
3. Prepare a club program of work.
4. Finish with 60 percent of enrollment.
5. All work completed and stories and reports in by Achievement Day.

REQUIREMENTS FOR MEMBERS

1. Members of this club shall be between the ages of 10 and 20 years on January 1 of the ensuing year.
2. First year club work or its equivalent.
3. Members shall make an earnest effort to observe the rules of health, to eat proper food, obtain adequate and regular sleep, exercise wisely, and cultivate habits of cleanliness.
4. The work required for the year is:
 - a. Use Second Year Health Score at beginning and close of year.

- b. Make Record of Personal Defects (from the Health Score) and correct them, entering corrections on record also.
 - c. Keep Food Habits Score Card one week at beginning and one week at close of year.
 - d. Make Height-Weight graph.
 - e. Develop proficiency in one group of exercises and in exercises for overcoming specific defects.
 - f. Make two posters to illustrate some phase of safety at home, or posture, or one on each.
5. Each member shall, if possible, make a complete exhibit at county and state fairs. A complete exhibit shall consist of the following:
- a. Height-Weight Graph.
 - b. Two Posters.
 - c. One article made as a contribution to group or community health.
(e) Food Habits score card.
6. Members shall attend club meetings and follow instructions.
7. Members shall write a story of their Health Club work and hand same, together with the Health Score, Record of Personal Defects, Food Habits Score Card, and Height-Weight Graph to their Club Leader or County Extension Agent.
8. Members entering health contest for local, county, or state championships shall obtain the written consent of their parents for the physical examination, which will be conducted by a competent physician or by a graduate nurse.

RECOMMENDATION FOR DAILY PROGRAM FOR CLUB MEMBERS

1. A full bath more than once a week, if possible.
2. Brushing the teeth once a day; better, twice.
3. Sleeping long hours with windows open—(8 to 10 hours for Club members).
4. Drinking much milk, but no tea or coffee.
5. Eating fruits and vegetables every day.
6. Drinking from 1 to 2 quarts of water each day.
7. Playing a part of every day out of doors—(Exercises will do).
8. A bowel movement every day.
9. Wash hands and face daily.

10. Clean nails daily.
11. Wash neck and ears daily.
12. Comb hair frequently.
13. Do some worthwhile work each day that will furnish exercise—(washing dishes, sweeping, out-door chores).
14. Take ten minutes' corrective exercises daily (to correct individual defects).
15. Spend at least 10 minutes daily on the exercises selected for achievement.

GENERAL INFORMATION

The second year of 4-H Health Club work will be taken up under two main heads:

1. Personal health activities will be continued from the first year.
2. Safety practices for the 4-H Club member at work about the home will be studied, with demonstrations of appropriate first aid for emergencies that might arise.

PERSONAL HEALTH ACTIVITIES FOR SECOND YEAR HEALTH CLUB MEMBERS

The first year of 4-H Health Club work is designed to form habits of nutrition, exercise, sleep, and cleanliness that will develop general good health. If such habits were practiced from babyhood, physical defects would seldom appear. Since boys and girls sometimes develop defects before taking up 4-H work, especially if there be an inherited tendency, the second year of 4-H health work has for one of its aims the correction of physical defects.

Before scoring for defects it would be well to consider briefly the characteristics that make up a good body.

A Survey of Physical Excellence

(Recommended by Miss Birdseye from the Washington office, from work she has observed and approved.)

POINTS OF A BODY IN GOOD RUNNING ORDER

Alert, happy expression.
Bright eyes, whites clear, no dark circles or puffiness.
Clean, red tongue; sweet breath.
Good color in cheeks, lips, eyelids, earlobes.
Good skin, not too dry, nor too moist.
Glossy hair.

Proper weight for height, age, type.
One or more daily bowel movements at regular hour.
Sound, quiet sleep.
Good appetite.
Good nerve control.
Cheerful disposition.

POINTS FOR A WELL BUILT BODY

Strong, even teeth, well enameled, meeting properly, no cavities.

Firm muscles, firm fatty tissues underneath skin.

Even shoulders. Shoulder blades flat against back.

Straight back, no lateral curve, or accentuation of normal curve at waist.

Deep, broad chest.

Flat abdomen.

Straight legs.

Normal size of knees and ankles.

Strong foot arches.

Straight toes.

POINTS SHOWING GOOD POSTURE

Head erect, chin in.

Chest high and forward of abdomen.

Abdomen firm and flat.

Feet parallel.

Ear, shoulder cap, hip bone, knee cap, and ankle bone in a line.

The Health Score and Record of Individual Defects

A more detailed health examination is necessary in the second year's work than was required in the first year, in order to reveal the defects that need to be corrected. This examination should be given the first time and the health score filled in, as soon after organization as possible; at the same time a record of individual defects, with the recommendation concerning each of them should be made. Then at the final health scoring, at the end of the club year, the improvements noted should be filled in on the record of individual defects.

The Correction of Defects

In youth, when bones are not yet fully hardened and muscles not yet fully developed, defects are a great deal more easily overcome than when growth and development are completed.

Corrective diet and corrective exercise are allies that with the aid of other proper habits will eradicate most of the bodily imperfections that second year 4-H Health Club members will discover in their scoring.

THE RELATION OF WEIGHT DEFECTS TO OTHER DEFECTS

One of the most important items on the health score card is the proper weight for age and height. The reason for this is that the Club member who has defects to overcome is very much handicapped if he is also under weight. Immediate attention should be given to corrective physical defects and attaining and maintaining correct weight.

The Height-Weight Graph

A chart will be kept as an aid in correcting underweight and maintaining correct weight. This will be a graph, showing the weight curve for the year. The Club member will need to study the weight-height-age chart, and compare the average weight for height and type with his own. If he weighs what he should, he will have less difficulty in maintaining his weight curve than one who is underweight; but the underweight boy or girl can usually bring the weight up to average if he tries.

Relation of Diet to Weight

With the average child under ordinary circumstances, increase in weight can be controlled by eating the right kind of food in sufficient quantity.

The Foods Classification

Foods That Supply Energy.—A large proportion of the food that young people eat is utilized in supplying the energy required for the ceaseless activity of youth. Starches and sugars, as exemplified by potatoes, bread, and all sorts of sweets, together with fats are the chief sources of energy. When more of these foods is eaten than the body needs for energy, they are stored as fat which adds to body weight.

Natural appetite prompts the intake of all the starches and sugars required, sometimes to the exclusion of foods that are needed for growth, as may be observed in the candy-eating child. Because of this, and because tissue building foods *may* be utilized for energy, the food habits score card does not require scoring on the amount of starchy foods and sweet foods eaten.

Foods That Supply Tissue Building Elements.—Milk, cheese, eggs, meat, dried beans, peas, and nuts supply the tissue building elements, which are known as proteins. They make muscle

and also increase body weight. The best growth is made on a variety of these foods. A diet depending largely on beans for protein is not properly balanced for health.

Foods That Supply Bone, Blood, and Tooth Building Elements.—The bone, blood, and tooth building elements are minerals, such as, calcium, iron, and phosphorous. The best source of calcium is milk; other minerals needed may be found in vegetables, fruits, and coarse grain products. Spinach and other green leaves, eggs, and lean beef are very rich in iron. The mineral content of the food eaten calls for especial attention in all cases of posture defects.

Foods That Promote Growth.—There are certain substances in our foods which are necessary for growth. These growth promoters are known as vitamins. For convenience and brevity we have given them letter names.

Vitamin A fortifies the body against colds, sore throats, and various diseases of the respiratory tract, and other types of infections. It is found abundantly in butter, and in green, leafy vegetables.

Vitamin B improves the appetite, builds tissues, and makes steady nerves. Vitamin B is abundant in all vegetables and in the outer branny parts of grain.

Vitamin C prevents a specific skin and tissue disorder known as scurvy, and is especially concerned with building up the inner parts of the teeth. When the teeth literally fall into holes, apparently decaying from within, Vitamin C has usually been lacking. This vitamin is abundant in uncooked cabbage, onions, turnips, tomatoes, spinach, oranges, and grapefruit. There is some vitamin C in most raw fruits and vegetables.

Vitamin D aids in the building of bone and the enamel or hard outer part of the teeth. It is found in cod-liver oil, egg yolk, and to some extent in butter and green, leafy vegetables. When the body is exposed to sunshine, it is able to manufacture some vitamin D independently.

Importance of Vegetables in the Diet

The value of vegetables in the diet becomes apparent when we note that every one of the vitamins enumerated above is found in vegetables. In overcoming defects it is very important that we get enough of these protective and building foods. Colds and sore throats call for foods containing vitamin A. The underweight boy or girl wants plenty of Vitamin B. If the teeth are bad C and D must be watched. The least complicated way to meet the situation is to make it a habitual practice to eat a

large variety of vegetables. The ideal diet for a Club member would include not less than ten varieties of vegetables.

The Food Habits Score Card

A food habits score card will be kept in the second year instead of a record—one week at the beginning and one at the end. Giving himself points on a score card is a little more difficult for a Club member than putting down a cross, but it also makes a more interesting game of it; and by comparing his score with the standards given in the directions he can tell whether his food habits are high or low standard. A low standard in the first scoring calls for especial attention throughout the year in order to show a higher standard in the second scoring.

THE CORRECTION OF DEFECTS BY EXERCISE*

Two groups of exercises are offered the second year club members for the development of agility, and one for balance. These exercises have a general value in the correction of defects; in addition several groups are offered for the correction of special defects.

All exercise is more beneficial when taken in fresh air and sunshine.

GENERAL EXERCISES

Exercises for Agility

During the years when the bones are lengthening most rapidly, exercises for agility stimulate the muscles to increased growth and help to prevent the "awkward age."

Group I. Horizontal Bar Exercises

(The best bar is a horizontal bar fastened on two uprights or suspended from above. A horizontal branch of a tree may be used.)

1. Grasp bar, raise body up on stiffened arms.
2. Grasp bar, fasten knees over bar, and hang.
3. Grasp bar, fasten knees over bar, loosen hands, and hang by legs.
4. Grasp bar with hands and toes.
5. Loosen hands and hang by toes.
6. Skin the cat. Hang by hands, thrust legs up and backwards until you land on feet.

* Exercises adapted from those in use in other states, and from "Health by Stunts," Pearl and Brown.

Group II. Miscellaneous Exercises for Agility

1. **Through Stick.**—Use an ordinary broom handle or small round stick and grasp it with both hands behind the back, palms forward. Bring the stick over the head to a position in front of the body, arms straight, hands still grasping the stick. Lift up the right foot, swing it around the right arm and through between the hands from the front over the stick. Crawl through, head first by raising the stick with the left hand over the head, skinning the stick over the right knee and the back. Come to an upright position and step back over the stick with the left foot, finishing with the stick still grasped in the hands in front of the body. Reverse this operation by stepping back through the stick with the left foot, and skinning it over the back in the opposite direction, returning to the first and original position.

2. **Jump Stick.**—Hold a light, small stick in the fingers in front of the body. Jump over the stick without letting go of it or touching it with the feet. Jump back. Try to go back and forth rapidly several times. In learning this, limber up the legs before trying and on the jump raise the knees as high up under the chin as possible. This exercise will develop a good spring. Practice by bringing one knee up against the chest hard several times, and stepping over the stick and back. Jumping the stick is mostly a question of pep and doing the right thing at the right time.

3. **Finger Jump.**—Hold the hands, palms up, low, in front of the body, so that only the ends of the middle fingers touch each other. Jump forward and backward over the fingers without pulling them apart.

4. **Toe Jump.**—Grasp the left foot at the toes with the fingers of the right hand, bending the knee outward as far as possible. Jump over the left foot with the right foot without letting go with the fingers. Jump forward and backward rapidly. Change to left hand and right foot.

5. **Jump Foot.**—Place one foot against a flat wall or other stationary object about a foot from the floor and jump over it with the other foot without removing the first foot from the wall. When you have done this with each foot, try jumping back over it as well as forward. Try placing the foot high on the wall and jumping over it. Take a run at it. To succeed you must not place any weight on the foot which is against the wall.

6. **Heel Jump.**—Lean over and take hold of the toes of the shoes, grasping them between thumb and fingers. Keeping a

tight hold, jump over a lead pencil or other object on the floor. The object is to see how far one can jump without letting go of the toes.

7. Human Knot (Elective).—Hold a round stick or broom handle in front of the body firmly, with arms crossed, both palms up and put the head through the triangle formed by the stick and the arms so that the right hand rests on the left shoulder, the left hand on the right shoulder and the stick across the back of the neck. Work the stick down over the back without losing the original hold, until it is possible to step back over the stick with both feet. Reverse by stepping into the loop and going through in the opposite direction.

Group III. Miscellaneous Exercises for Balance

1. Body Lift.—Sit on cushions with the back against a wall, feet out straight. Place broom handle under knees. Try to raise body over the broom handle up on feet.

2. Body Bounce.—Sit on the ground, one foot in each hand, neither feet nor hands touching the ground. Attempt to get some spring out of the body, hitching along as fast as possible and keeping the balance. It is very difficult to jump clear of the ground in this manner.

3. Neck Spring.—Standing one-half the height from the wall, place the forehead against it. Spring back to a standing position by bending the knees and using the neck and body muscles. See how far back from the wall the toes can be placed and still allow one to spring back to a standing position. It may be wise to use a pad between the wall and the forehead.

4. Palm Spring.—Stand three-fourths the height from some solid stationary object, as a wall, and, keeping the feet stationary, lean forward and place one hand against the wall. Attempt to push away to an upright position without moving the feet. If this is too easy, stand farther back.

5. Knee Dip.—Stand on one foot. Grasp the other foot behind the back with the opposite hand. Bend down with arm outstretched for balance, touch bent knee to the ground lightly, and return to standing position without touching the ground with any other part of the body.

6. Crane Dive.—Bend a piece of cardboard or paper so it will stand up by itself. It should be about 6 inches high. The object is to pick this up with the teeth by bending forward from a standing position on one foot. It is comparatively easy to

bend forward from this position until the chest strikes the knee; beyond that it is difficult. The foot not in use is stretched out behind for balance. Try this first on one foot, then on the other.

7. Tip up or Head Stand.—Squat down with hands flat on floor, elbows inside of and hard against the knees, and arms tight against the ribs. Lean forward slowly, placing the weight of the body on the hands and elbows, until the feet swing clear of the floor. Attempt to pick up a handkerchief from the floor with the teeth and regain the original position. This is a good exercise to lead up to one form of the head stand. Instead of attempting to pick up anything, simply rest the head on the floor 6 or 8 inches in advance of the hands and push the feet up in the air.

8. Cart Wheel.—Stand erect with left hand at the side, fingers spread, palm down, and right hand raised over the head. Incline the body directly to the left side, striking the ground. Follow immediately by the right hand and then by the right foot, the left foot striking last. When done correctly, the body has the appearance of a wheel; the arms and legs are the spokes. The more rigid the body is kept, the better is the appearance of the stunt; feet must travel straight up in the air over the head. Turn five times.

SPECIAL EXERCISES FOR CORRECTING DEFECTS*

Many physical defects disappear automatically when posture defects are corrected; consequently the first aim in building up the body to approach physical perfection should be the correction of posture.

EXERCISES FOR POSTURE DEFECTS

To Straighten a Crooked Spine

Use Horizontal Bar Exercises 1, 2, 3, and 5, p. 13; also the following:

- a. One-Legged Soldier—Lie on the back with hands at the sides. Bend the right knee, grasping it with both hands. Raise the left leg to a vertical or upright position. Return it to the floor. Grasp the bent left knee and repeat the exercise, with the right leg. Repeat alternately eight times.

For Round Shoulders

Corner Exercise.—Stand in good posture, facing a corner of the room. Place the palms of the hands, with thumbs pointing

* Numerous exercises that have value in overcoming specific defects, have been previously given in this and the first year bulletin; reference will be made to them in connection with new exercises listed for each defect.

down, against the walls at shoulder height. Keep elbows high, rise on toes, and sway forward from the ankles, keeping abdomen in, back straight, head up and chin in. Return to starting position. Repeat eight times.

For Protruding Shoulder Blades

Use "Grow Tall," p. 15, "Pin Wheels," second part, p. 15, and "Wind Mills," p. 16, in First Year 4-H Health Club Bulletin; also the following:

Breast Stroke.—Lying face down on couch, table, or bed, finger tips on chest, and head lifted, extend arms above head so fingers point in opposite direction from toes. Keeping the head and as far as possible the chest raised from support, describe a half circle with the hands at the sides as if swimming. Draw the arms and hands up to starting position. Repeat eight times.

For Hollow Chests

Use "Arizona Breezes," p. 16, First Year 4-H Health Club Bulletin, also the following:

- a. Breathing Exercise I.—Stand erect, hands at sides. Raise the arms to horizontal, at the same time drawing a full breath. Bend to the left, so that the right arm goes up and the left arm down, at the same time increasing the intake of air. Repeat to right, left and right again. Exhale, lowering the arms. Repeat four times. This exercise increases the lung capacity.
- b. Breathing Exercise II.—Stand erect, knees well back, chest well forward, reach the arms directly forward, the hands clenched, the palms turned upward. Draw the arms back, bringing the elbows as far back and as close together as possible, with the forearms pressed close to the sides. Stretch the chest forward—do not allow the strength of the arms to draw it backward. Keep the chest in advance of the feet. Inhale strongly four times; relax. Repeat eight times.

To Correct Prominent Abdomen

Use the "Forward Reach," p. 17, First Year 4-H Health Club Bulletin; Horizontal Bar Exercise 6, p. 13, in this bulletin; and the following:

- a. Paper on the Wall or Catch Penny.—Stand with heels 4 inches from the wall, but with hips, shoulders, and head touching the wall. Place right hand flat against wall behind back at waist line. Pull in the lower abdominal

muscles and make the back touch your hand. Relax. Repeat eight times. For Catch Penny, try to hold a coin in place between the wall and the small of the back. Do not hold the breath, but breathe easily while the abdominal muscles are held in.

- b. Leg Flexing Exercise.—Lie on the back. Straighten the left ankle and the knee; raise the left leg to perpendicular position; keep the knee and the ankle straight. Move in the thigh joint only. Contract the muscles of the abdomen, resisting with the muscles of the back. Bend the knee, and keeping thigh and abdominal muscles tense, bring the heel to the thigh, keeping upper leg perpendicular; then stretch the leg again. Bend knee and stretch leg four times, then slowly lower the leg to horizontal, keeping knee and ankles straight and abdominal and hip muscles tense. Raise the right leg in the same manner, bending the knee four times and lower to the floor. Then repeat with each leg as indicated above, making eight knee flexions with each leg. This will strengthen the abdomen and hips and is excellent for constipation.

For Straightening an Exaggerated Lumbar Curve

Use "Jumping Jack," p. 16, "Frog Dance," and "Bear Dance", p. 17 in the First Year 4-H Health Club Bulletin; also Paper on the Wall, p. 17, in this bulletin.

EXERCISES FOR FOOT DEFECTS

Use "Jumping Jack," p. 16, First Year 4-H Health Club Bulletin; also the following:

1. Tiptoe Exercise.—Wear low heeled and preferably soft soled shoes. Stand with the feet parallel about 6 inches apart. Rise as high as possible on tiptoe. Return to original position. Repeat until fatigued. As the muscles grow stronger it should be possible to repeat this from 50 to 100 times. Vary by walking or running on tiptoe.

2. Picking up Marbles—With the feet bare, practice picking up marbles or other small objects with the toes.

EXERCISES FOR THROAT DEFECTS AND EYE WEAKNESS

Use "Desert Owls," p. 15, First Year 4-H Health Club Bulletin; and the following:

1. Vitalizing Exercise.—Stand or sit erect. Turn the head as far to the right as possible; tense the muscles of the neck, and depress the chin as far as possible, then raise it, tipping the head

back over the left shoulder. Return to original position and repeat, turning the head to the left. Repeat the entire exercise until fatigued.

EXERCISES FOR COLD IN THE HEAD AND CATARRHAL CONDITIONS

Use "Desert Owls," p. 15, First Year 4-H Health Club Bulletin; Horizontal Bar Exercises 3 and 5, p. 13, "Head Stand," p. 16, and Vitalizing Exercise, p. 18, of this bulletin.

EXERCISES FOR CONSTIPATION

Use "Forward Reach," and "Overhead Reach," p. 17, and "Human Rocker," p. 16, First Year 4-H Health Club Bulletin; Horizontal Bar Exercise 6, p. 13, and Leg Flexing Exercise, p. 18, in this bulletin; and the following:

1. Back Twisting.—Lie on the back; grasp the hands in front; pull the head forward until you stretch the muscles down the spine. Make the muscles of the back tense. Keep the head pulled forward. Reach with the arms diagonally to the right and turning the head to the left look over the left shoulder. The body rests on the muscles on the small of the back, the arms twist the lower muscles to the right and the head twists the muscles back to the neck and across the shoulders to the left. Reverse. Repeat eight times. This stimulates the liver and thus aids in overcoming constipation.

2. Trunk Twisting.—Lie on back; raise trunk to sitting position, extend arms horizontally at side and twist trunk first to right side and then to left, keeping arms on level with shoulders. Repeat eight times.

3. Up and Down Exercise.—Lie on back on floor or bed, with spine flattened and knees bent. Place one hand lightly on the abdomen. Raise the abdomen by expanding the muscles. Relax. Contract the abdominal muscles forcibly so that the hand sinks downward. Relax. Push up the abdominal muscles again. Repeat 10 to 15 times.

THE IMPORTANCE OF HABIT IN OVERCOMING DEFECTS

Habit a Hindrance or Help

Corrective measures for overcoming physical defects are often rendered valueless by careless habits throughout the day. No amount of corrective exercise will raise a hollow chest whose owner habitually slouches in his seat at school. The bones and muscles of the body are undergoing change and development 24 hours of the day. If improvement be desired, an earnest, conscientious effort to habitually use them correctly should be the aim of the Club member..

Making Good Posture a Habit

Posture in particular is strongly influenced by habitual behavior. Correct posture while sleeping, sitting, standing, or walking should be practiced sufficiently to make it habitual. The following table of suggestions by a posture specialist may be of help in fixing the essentials of good posture in mind.

Suggestions For the Maintenance of Good Posture
(From Harriet Wilde)

Sleeping:

1. **Bed:** Level, not soft or springy.
Flat with no pillows.
Put a roll under covers at foot, higher than length of foot.
2. **Position:** On back or abdomen; arms and trunk straight but relaxed; or first on one side and then the other. When on alternate sides, a small, soft pillow is allowed.

Sitting:

Chair: Height of seat from floor should measure the same as length from foot to knee of individual using it. Depth of seat should measure the same as from knee to buttocks. Back should allow space for buttocks and be straight or slightly sloping backward, with no curve forward at shoulder level.

Posture in chair: Body as far back on chair as possible, sitting on buttocks; not on end of spine; trunk erect or resting against back; feet on floor or stool.

Standing:

Feet parallel, as close together as is comfortable considering knee contour; toe pointing straight forward, large toe flat, small toes curving and resting on tips.

Knees straight, not bent.

Abdomen firm, flat, and back of line of chest.

Chest broad, deep, and flexible, forward of line of abdomen.

Hips level, back straight with enough curve forward in lower part, but not too much. A flat lower back is as far from normal as a hollow back.

Shoulder blades level and lying flat against upper back.

Shoulders level and in line with ears, but held loosely, not drawn stiffly back.

Head and neck erect with chin in.

Walking:

Same general position as in standing; keep toes pointing forward, gripping the ground with foot muscles.

Effort to correct posture:

Feet parallel, grip floor with toes, raise arches, flatten abdomen, push up with top of head, allow arms to hang loosely at side and breathe easily.

In helping someone else, get feet in position, put hands on abdomen and lower back to assist and urge him to push up the top of the head. Do not say "Put your heels together," or "shoulders straight," both are wrong.

The Poster on Good Posture

The making of posters on posture helps to fix the principles of good posture in the mind and the posters serve as reminders to others.

SECOND YEAR 4-H HEALTH CLUB MEMBERS SAFETY PRECAUTIONS

The Second Year Health Club member is usually beginning to take an active part in the work in the home; therefore the safety precautions and first aid offered in the second year of health club work deal with emergencies that may arise under such conditions.

Safety and First Aid in the Home

CHOKING

Two passages into the body open from the throat—the œsophagus or gullet, through which food is carried to the stomach, and the trachea, or windpipe, through which air passes in breathing. When something other than air gets into the trachea, it may, if large enough, cause death by choking. A serious case of choking rarely, if ever results from getting food into the trachea; the cause of trouble is usually something else. Aside from the uncleanness of putting foreign objects in the mouth, there is real danger in so doing, as a sudden sneeze or a laugh may draw an article down; and anything as large as a furniture tack, if drawn far enough, will cause death.

First Aid.—Quick action is essential. An effort to vomit will help expel the intruder; this may be brought about by running the finger down the throat. If another person is choking, slapping him smartly on the back between the shoulder blades will help.

POISONS

Three general rules should be followed in the care of poisons.

1. Keep poisons where young children can not get at them. The antiseptics usually found in any home, such as iodine, bichlo-

ride of mercury, and carbolic acid belong on a high shelf. Common articles that would cause poisoning if swallowed by a child, and therefore should be out of reach are match heads, turpentine, gasoline, and household lye.

2. Keep poisons in plainly marked containers. Poisons purchased in quantity for combatting insect pests or animal parasites are sometimes put in other than the original containers. A whole family has been poisoned by the use of arsenate of lead out of a baking powder can.

3. Never take a dose of medicine in the dark. You may get the wrong bottle.

First Aid.—Act Quickly. If the poison is known to be alkaline such as household lye, drink vinegar or lemon juice. If the poison is known to be an acid, such as carbolic acid, drink a solution of baking soda. In any case cause vomiting, by drinking a quantity of warm water with salt or mustard in it (one tablespoon to a quart) or plain if necessary; if there be no hot water start with cold water while some heats; and keep on drinking until vomiting occurs. Tickling the throat with the finger or a spoon handle may help.

Send for the doctor as soon as possible, but don't wait for him before doing these things. If there be distress after vomiting, it is always good to take slightly beaten white of egg.

WOUNDS

Safety precautions in the care of wounds consist of taking proper care of articles that may cause wounds. The motions employed in cutting with a sharp knife should never endanger any part of the body. Boards should not be left lying about with the points of nails sticking up through them. Pins and needles should not be left in clothes to be laundered. The barbs of fish hooks should be stuck into corks, or covered in some other way. Young children should not be permitted to play with sharp pointed scissors or sharp knives.

*First Aid.—*A wound may be a cut, a puncture, or a bruise. In any case where the skin is broken, washing it thoroughly with an antiseptic to destroy any micro-organisms that may have found entrance is of first importance; fatal cases of lockjaw or blood poisoning may develop from failure to do so. Boracic acid solution, one teaspoon to a pint of hot water is a non-poisonous antiseptic that serves very well; a bottle of it may be kept on hand ready mixed; washing with clean water and painting with mercurichrome serves the same purpose. Moderate bleeding does no harm and is often purposely induced in a deep wound to wash out bacteria.

A dressing may be made of sterile gauze or clean old muslin; it may be wet in boracic acid solution, or smeared with clean ointment to keep it from drying down on the wound. Bandages or strips of surgeons adhesive tape will be needed to hold it on. Either may also be used to draw the edges of a cut together; if the latter, strips of tape should be struck down by one edge on each side of the cut, and the free edges of tape then drawn together with needle and thread, stitch by stitch, over a small dressing.

Bruises in which the skin is not broken are best treated by the application of cloths wrung out of hot water. A black eye is helped by gentle rubbing.

BURNS

With young children, accidental burns from fire usually result from playing with matches. Club members are more apt to be burned while burning up trash, or cooking over bonfires, in the case of boys; or in learning to cook or can, if girls. A precaution against fire hazard when tending a bonfire or campfire is the wearing of woolen clothing, which is less inflammable than cotton. If cotton clothing is worn, it should be heavy, firm, and smooth. The use of gasoline or kerosene to facilitate the burning of trash or the ignition of fuel for the camp fire is not advisable. Girls may learn to avoid burns in club work by careful planning beforehand, and by having plenty of holders and learning to use them. If a kerosene or gasoline stove is used, it should not leak or flare up; that is, it should be a safe stove.

A certain number of burns for people of all ages result from accidents with lamps, and with matches used legitimately. The outing flannel night garment is often the real offender. New outing flannel is very inflammable, and should always be washed before wearing.

First Aid.—If a person's clothing be afire, a loose garment may sometimes be removed quickly enough to prevent injury; otherwise the victim should drop to the floor or ground and roll. Bystanders can best assist by wrapping him in a blanket, rug, or any similar heavy article, taking care to wrap from the head down, to prevent his breathing flames. The fire out, alleviation of the pain of the burns becomes necessary. As this is caused by exposure to air, plunging the burned part into cold water gives the most instant relief. If the burns be extensive the victim may get into a tub of water—clothes and all; and in this case the water had better be slightly warmed. As rapidly as possible, wet dressings made of gauze or clean old muslin and tannic acid should be applied. If the patient shows faintness

and exhaustion, he may, however, need to be put to bed beforehand; and if the burn has been caused by oil or hot fat, so that the surface of the skin is greasy, it should be thoroughly cleansed. Tannic acid solution should be freshly mixed, in the proportion of 24 grains of tannic acid to an ounce of sterile water. (The acid when purchased at the drug store should be divided into 24-grain powders; water is made sterile by boiling; 2 tablespoons of water is equivalent to one ounce.) If no tannic acid is at hand, wet dressings smeared with a paste of soda may be substituted. A third choice is any heavy oil or salve such as castor oil, glycerine, vaseline, lard, or unsalted butter. After 24 hours the top of the blisters may be snipped with scissors that have been washed in an antiseptic solution.

A physician should be secured as soon as possible for deep or extensive burns; but the completeness of recovery often depends upon what has been done before he can get there.

SAFETY NUMBERS IN THE CLUB PROGRAM

First aid may best be learned by demonstrations in club meetings. The subject of safety habits, which is more important, should not be neglected. Club members may make posters on safety and bring them to the club meeting for discussion.

RECORDS

SECOND YEAR HEALTH SCORE

	Perfect Score		
	Sub-Heads	Tot-als	First scoring Sec-ond scoring
General Appearance:		10	
Expression of face, happy.....	2		
Manner, spirited, alert, active.....	2		
Bodily condition, radiating good health.....	3		
Symmetry in Development.....	3		
Weight:		15	
Good for height, type, and age; take off ½ .. point for each pound below good weight ..	15		
Note: Good weight includes all weights not more than 10% below average for height, type, and age.			
Posture:		15	
Shoulders, even; not rounded.....	3		
Body, erect; not drooping.....	3		
Head, erect; not bowed, chin in.....	3		
Feet, arches good; toes capable of free movement; great toe extending in a line parallel to an imaginary line from heel to great toe joint.....	3		
Abdomen, flat, body line unbroken by abdo- men	3		
Mouth, Nose, and Throat:		10	
Lips, red; not pale.....	1		
Tongue, clean and red; not coated or pale.....	2		
Manner of breathing, mouth closed; no ob- struction	2		
Quality of breath, sweet, not foul.....	2		
Mucous lining, pink, healthy; no discharge....	2		
Voice, clear; no hoarseness.....	1		
Teeth:		10	
Formation:			
Regularity, teeth straight; no teeth lacking for age (see p. 32 a, First Year Health Club Bulletin)	3		
Position, teeth meeting evenly.....	2		
Condition, teeth sound; no decay.....	2		
Care, teeth clean; no spots or discolorations..	3		
Skin:		10	
Color, clear, rosy; not sallow or muddy.....	3		

	Perfect Score		
	Sub-Heads	Tot-als	First scor-ing Sec-ond scor-ing
Texture, smooth; not chapped, scaly or rough	2		
Care, clean, sweet, washed; not dirty or odorous	5		
Hair:		5	
Healthy, glossy; not dull or lifeless.....	1		
Care, clean; no lint, dust, or dandruff.....	3		
Arrangement, neatly combed; no tangles.....	1		
Eyes and Vision:		10	
Luster, bright; not dull.....	2		
Whites, clear; not muddy, yellow, or blood shot	2		
Lids, normal; not puffy.....	2		
Straightness of vision, eyes not crossed.....	2		
Ability to see; able to read ordinary print at arm's length without strain; able to read ordinary billboard sign across a street (either with or without glasses).	2		
Hearing:		5	
Able to hear ordinary conversation at 16 feet	5		
Bowel Action:		10	
Frequency; daily movement.....	6		
Regularity; bowel movement occurs about the same time each day.....	4		
Total		100	

HOW TO FILL OUT HEIGHT-WEIGHT CHART

1. Study the sample Height-Weight Chart.
2. Measure your height and weight yourself. Height without shoes to the nearest inch, and weight without shoes to the nearest pound. Weigh at about the same hour of the day each time. Remove outside wraps and shoes and do not weigh within a half hour after taking a drink of water. Age is taken as of the nearest birthday.
3. Fill in the record at the top of your Height-Weight Chart, using the Weight-Height-Age Table to get the type, average weight for age, height, and type, and the average gain for one year.
4. Record the date and your weight in little squares at the upper left hand corner of the table form.
5. Record below the bottom line of the table in the column "Pounds," your actual weight at the beginning of your record. Then number each line up the page as shown on the sample Height-Weight Chart.
6. On the line corresponding to the number of pounds which you should weigh, mark an X on the line for the date weighed. Now go over to the right side of the table and mark an X on the line for the last month corresponding to the increase in weight, the average person of your height, type, and age should make during the year. Connect these two points with a straight line and you have a line representing the ideal gain in weight for an average person like yourself for one year.
7. Weigh yourself each month as near the corresponding date as possible. Record the date and weight as at first and make a dot on the line below, corresponding to your weight.
8. Connect these points with a line and you will have your "weight curve."
9. You should keep this record for a year, but since we are not requiring a year's record, we enclose two of these Height-Weight Charts. Fill out both of them. Keep one for yourself and send the other in with the story and Health Score Cards.

Weight—Height—Age Table for Girls of School Age

Height (inches)	Average weight for height (lbs)	5 Years	6 Years	7 Years	8 Years	9 Years	10 Years	11 Years	12 Years	13 Years	14 Years	15 Years	16 Years	17 Years	18 Years	Height (inches)
		5 Years	6 Years	7 Years	8 Years	9 Years	10 Years	11 Years	12 Years	13 Years	14 Years	15 Years	16 Years	17 Years	18 Years	
38	33	33	33													38
39	34	34	34													39
40	36	35	36	36*												40
41	37	37	37	37*												41
42	39	39	39	39*												42
43	41	41	41	41	41*											43
44	42	42	42	42	42*											44
45	45	45	45	45	45	45*										45
46	47	47*	47	47	48	48*										46
47	50	49*	50	50	50	50	50*									47
48	52		52	52	52	52	53*	53*								48
49	55		54	54	55	55	56	56*								49
50	53		56*	56	57	58	59	61	62*							50
51	61			59	60	61	61	63	65							51
52	64			63*	64	64	64	65	67							52
53	68			65*	67	67	68	68	69	71*						53
54	71				69	70	70	71	71	73*						54
55	75				72*	74	74	74	75	77	78*					55
56	79					76	78	78	79	81	83*					56
57	84					80*	82	82	82	84	88	92*				57
58	89						84	86	86	88	93	96*	101*			58
59	95						87	90	90	92	96	100	103*	104*		59
60	101						91*	95	95	97	101	105	108	109	111*	60
61	108							99	100	101	105	108	112	113	116	61
62	114							104*	105	106	109	113	115	117	118	62
63	118								110	110	112	116	117	119	120	63
64	121								114*	115	117	119	120	122	123	64
65	125									118*	120	121	122	123	125	65
66	129										124	124	125	128	129	66
67	133										128*	130	131	133	135	67
68	138										131*	133	135	136	138	68
69	142										135*	137*	138*	140*	142*	69
70	144										136*	138*	140*	142*	144*	70
71	145										138*	140*	142*	144*	145*	71
Age—years		6	7	8	9	10	11	12	13	14	15	16	17	18		
Average height (inches)	Short	43	45	47	49	50	52	54	57	59	60	61	61	61	61	
	Medium	45	47	50	52	54	56	58	60	62	63	64	64	64	64	
	Tall	47	50	53	55	57	59	60	64	66	66	67	67	67	67	
Average annual gain (lbs.)	Short	4	4	4	5	6	6	10	13	10	7	2	1	1		
	Medium	5	5	6	7	8	10	13	10	6	4	3	1			
	Tall	6	8	8	9	11	13	9	8	4	4	1				

Weight-Height-Age Table for Boys of School Age

Height (inches)	Average weight for height (lbs.)	Age—years																		Height (inches)	
		5 Years	6 Years	7 Years	8 Years	9 Years	10 Years	11 Years	12 Years	13 Years	14 Years	15 Years	16 Years	17 Years	18 Years	19 Years					
38	34	34	34*																	38	
39	35	35	35																		39
40	36	36	36*																		40
41	38	38	38	38*																	41
42	39	39	39	39*	39*																42
43	41	41	41	41*	41*	39*															43
44	44	44	44	44	44*	44*															44
45	46	46	46	46	46*	46*															45
46	48	47*	48	48	48	48*	46*														46
47	50	49*	50	50	50	50*	50*														47
48	53		52	53	53	53	53	50*													48
49	55		55	55	55	55	55	55*	55*												49
50	58		57	58	58	58	58	58*	58*												50
51	61			61	61	61	61	61	61*												51
52	64			63	64	64	64	64	64*												52
53	68			66*	67	67	67	67	68	64*											53
54	71				70	70	70	70	71	71	72*										54
55	74					72*	72	73	73	74	74*										55
56	78					75*	76	77	77	77	78										56
57	82						79*	80	81	81	82	80*									57
58	85							83*	84	84	85	85*									58
59	89								87	88	89	89	90	90							59
60	94								91*	92	92	93	94	95	96						60
61	99								95	96	97	99	100	103	106*						61
62	104								100*	101	102	103	104	107	111	116*					62
63	111								105*	106	107	108	110	113	118	123	127*				63
64	117									109	111	113	115	117	121	126	130*				64
65	123										114*	117	118	120	122	127	131	134			65
66	129											119	122	125	128	132	136	139			66
67	133											124*	128	130	134	136	139	142			67
68	139												134	134	137	141	143	147			68
69	144												137	139	143	146	149	152			69
70	147													143	145	148	151	155			70
71	152													148*	150	152	154	159			71
72	157														153	156	158	163			72
73	163														157*	160	162	164	167		73
74	169														160*	164	168	170	171		74
Age—years		6	7	8	9	10	11	12	13	14	15	16	17	18	19						
Average height (inches)	Short	43	45	47	49	51	53	54	56	58	60	62	64	65	65						
	Medium	46	48	50	52	54	56	58	60	63	65	67	68	69	69						
	Tall	49	51	53	55	57	59	61	64	67	70	72	72	73	73						
Average annual gain (lbs.)	Short	3	4	5	5	5	4	8	9	11	14	13	7	3							
	Medium	4	5	6	6	6	7	9	11	15	11	8	4	3							
	Tall	5	7	7	7	7	8	12	16	11	9	7	3	4							

SAMPLE SHEET

HEIGHT-WEIGHT CHART

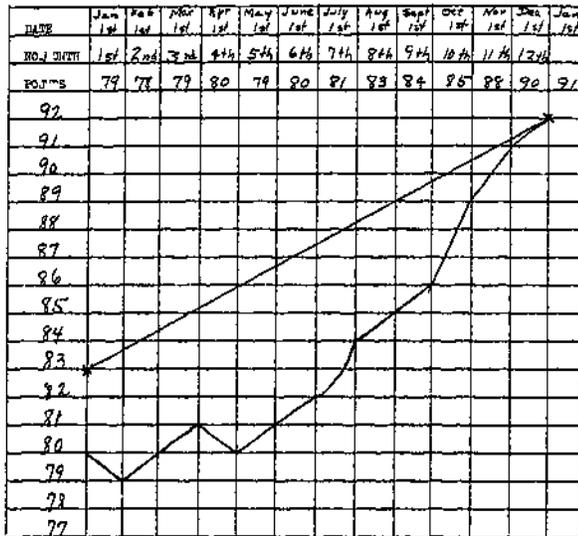
Age at nearest birthday 18 Grade 7 Date January 1-1931-January 1-1932

Height 57 in Average height for age 56 in Type (see table) Short

Weight 79 lbs. Average weight for age height and type at this date 82 lbs

Over or underweight 3 lbs 3+ per cent Date January 1-1931

average gain for time as shown in table 9 Club Member's gain or loss 13 lbs



John Smith Club Member
Thos. Quilley Club Leader
 Address Engar Apache County

DIRECTIONS FOR USING THE FOOD HABITS SCORE CARD

Note the foods eaten at each meal time, and set down in the proper column for that day the credits deserved as indicated by the number of servings eaten. (An average serving of vegetables, fruits, and cereals is one-half cup.) Find the total of each day's credits; and then subtract deductions if there are any. At the end of the week find the average.

What Your Score Indicates

If your final score is between 85 and 100, with not less than 10 credits under each point, your food selection standard has been good.

A score of from 75 to 85 indicates a fair standard.

Credits below 75 indicate a low standard.

Milk means whole milk or evaporated milk diluted one half with water. Count milk cooked in food and that taken as a beverage.

Vegetables include all foods commonly known as vegetables.

Leafy vegetables include all dark green leaves, cabbage, and lettuce. Extra credit is given for these because of their special value as sources of vitamin A and minerals.

Fruits include all foods commonly known as fruits. Since tomatoes are botanically fruits and very similar to oranges in value, they may be counted either as vegetables or fruits.

Raw fruits and vegetables and canned or fresh tomatoes are given extra credit because of their special value as sources of vitamin C.

Grain products include all breakfast foods, breads, and other flour products. The whole grains are those containing all or most of the coating of the grain. Most dark colored cereals are in this class. Whole grain, cooked cereals are especially beneficial.

Water includes liquid in milk, or in any beverage or soup in addition to plain water.

Sweets include all confections, cake, pie, and foods with considerable sugar or syrup.

Meat includes fish, game, and poultry, but does not include bacon or salt pork, which are classified as fats.

Dried beans and peas do not contain as efficient proteins as do the animal protein foods. They are, however, valuable to supplement these foods as sources of protein.

SECOND YEAR FOOD HABITS SCORE CARD

	Per- fect Score							
		S	M	T	W	Th	F	S
Eating habits:								
No sweets between meals.....	5							
Breakfast every day.....	5							
One hot dish for breakfast....	5							
Roughage:								
Whole grain product, one serv- ing 5, two servings.....	10							
Vegetables, one 5, two.....	10							
Extra credit for leafy vege- tables	5							
Fruits, one serving 5, two servings	10							
Extra credit for raw fruit or vegetable or canned toma- toes	5							
Beverages and milk:								
A pint of milk 5, 1½ pints 10 a quart of milk.....	15							
Six glasses of water 5 or eight glasses of water.....	10							
No tea or coffee.....	5							
Tissue Builders:								
Cheese, eggs, meat, dried beans, peas or nuts, one serving 10, two servings...	15							
Total	100							

.....Club Member Club Leader

.....Average for week Address.....County.

EXERCISE RECORD

One group required for achievement.

Group A. Bar Exercises	First Scoring	Second Scoring
1st—Raising body on bar.....		
2nd—Hanging by hands and knees.....		
3rd—Hanging by knees alone.....		
4th—Hanging by hands and toes.....		
5th—Hanging by toes alone.....		
6th—Skin the Cat.....		
Group B. Miscellaneous Exercises for Agility.....		
1st—Through Stick.....		
2nd—Jump Stick.....		
3rd—Finger Jump.....		
4th—Toe Jump.....		
5th—Jump Foot.....		
6th—Heel Jump.....		
7th—Human Knot (Elective).....		
Group C. Miscellaneous Exercises for Balance.....		
1st—Body Lift.....		
2nd—Body Bounce.....		
3rd—Neck Spring.....		
4th—Palm Spring.....		
5th—Knee Dip.....		
6th—Crane Dive.....		
7th—Tip up or Head Stand.....		
8th—Cartwheels (Elective).....		

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