



5 Calm Breaths Tally Sheet



Name _____

Practice your **5 calm breaths** over the next week. Keep a tally of how much you practice and how you got on and felt afterwards (you can use emojis or ratings – whatever you like!).

Day	5 calm breaths tally	How did you get on? How did you feel afterwards?
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		