

# How Am I Growing?



Name \_\_\_\_\_

Age \_\_\_\_\_ Today's date \_\_\_\_\_

Height/length \_\_\_\_\_ inches

Weight \_\_\_\_\_ pounds \_\_\_\_\_ ounces

Head size \_\_\_\_\_ inches

Hemoglobin \_\_\_\_\_ g/dl

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making your home smoke-free;  
learn how at  
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**Eat fruits and vegetables  
every day!**

