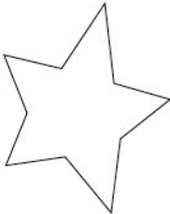
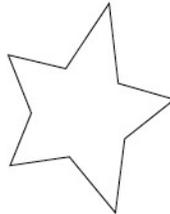
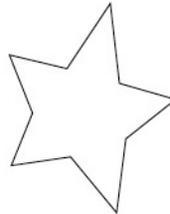
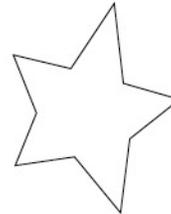
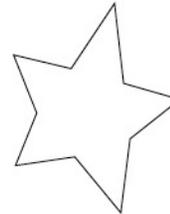
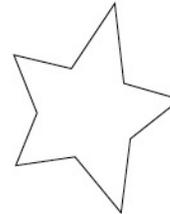




MON TABLEAU DES DÉFIS

Nom de l'enfant _____

	LUNDI	MARDI	MERCREDI	JEUDI	VENDREDI	SAMEDI	DIMANCHE
Semaine 1							
Semaine 2							
Semaine 3							
Semaine 4							