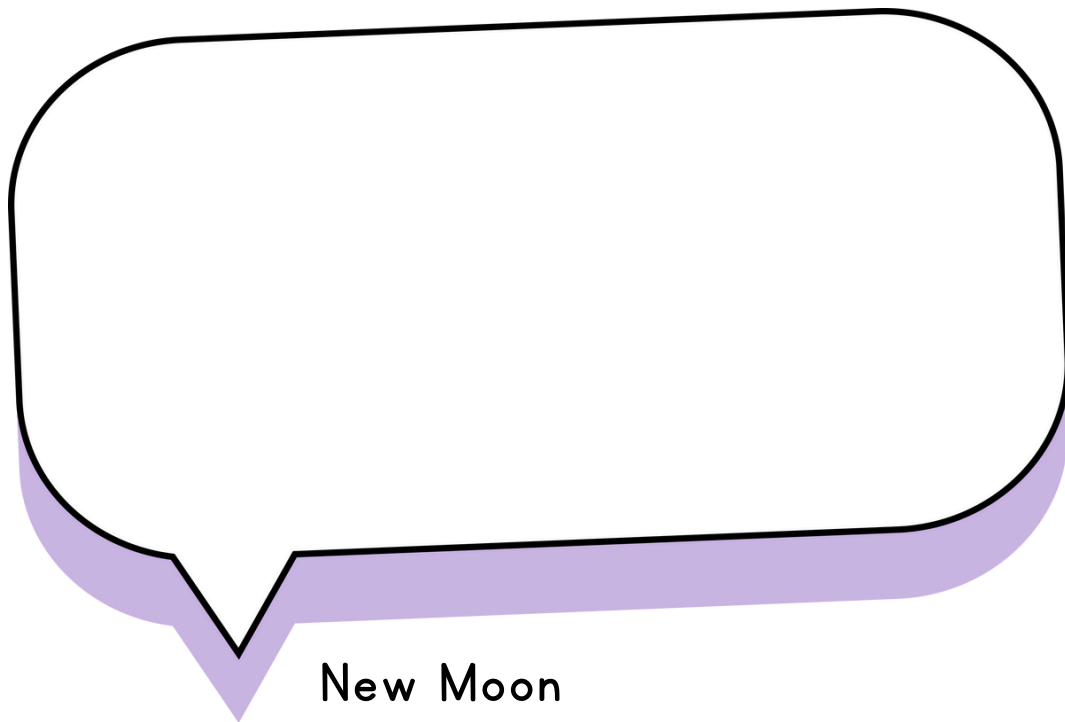


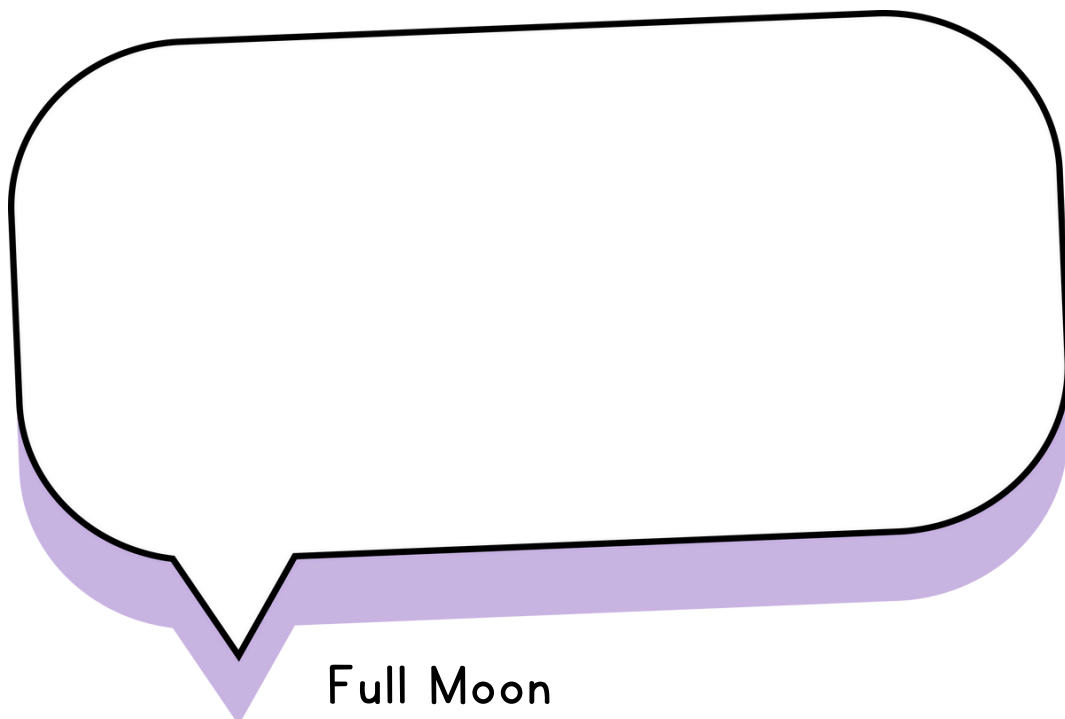
Month: _____

PHASES OF THE MOON

Note how you feel over these phases



New Moon



Full Moon