

Name: _____

Date: _____

Self-Care

X C A X A V U J H J N G S O G I A
H T A B T I L E L D N A C N N V Y
K D E O E Q M D M A S S A G E C A
D Y S O S L A E M Y H T L A E H D
F A I O R I O U Q P D M Z P S H A
L D C X Z J T L W F A L R J N U I
E R R J H G Q V Y T M I I T Q E D
S E E E Z I T R O I R P N Z F C E
O P X E D U T I T A R G V T G N M
T M E R U T A N N I K L A W O A L
D A P L A Y T I M E G J Z J B D A
N P D T A L K T O A F R I E N D I
I S D N E I R F H T I W G N A H C
K J L R K H G U A L A A T Y M F O
E Z M S E L F D Y E Z R X I V Z S
B X D L T S D E K A B D U E E P O
K L T E T A T I D E M P A N R O N

No social media day
Be kind to self
Healthy Meals
Gratitude
Playtime
Laugh
Bake

Hang with friends
Candlelit Bath
Pamper Day
Meditate
Massage
Dance
Draw

Talk to a friend
Walk in nature
prioritize
Exercise
Paint
Rest
Nap