The Sparkle Smile Series

Smile Habit Chart

Let's take care of our teeth every day!



My Name: _____

My Daily Habits	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Brush in the morning	☆	☆	☆	☆	☆	☆	☆
Brush at night	☆	☆	☆	☆	☆	☆	☆
Use a pea-sized amount of toothpaste	☆	☆	☆	☆	☆	☆	☆
Rinse after snacks/meals	☆	☆	☆	☆	☆	☆	☆
Eat healthy foods	☆	☆	☆	☆	☆	☆	☆
Limit sugary snacks and drinks	☆	☆	☆	☆	☆	☆	☆



Well Done! You are building a Sparkle Smile!

My Weekly Reward

This week I will:

_____

I can do it!