Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How Does the Law Affect You?**

**Directions.** Brainstorm a list of ten daily activities. In your group discuss and determine how the group members daily activities are affected by law, is the law a federal, state, or local law, what the reason for the law might be, and should the law be changed and why.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Activity** | **Affected by Law?** | **Federal, State, or Local Law?** | **Reasons for the Law** | **Should the Law be Changed? Why?** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
| **5.** |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Activity** | **Affected by Law?** | **Federal, State, Local Law?** | **Reasons for the Law** | **Should the Law Be Changed? Why?** |
| **6.** |  |  |  |  |
| **7.** |  |  |  |  |
| **8.** |  |  |  |  |
| **9.** |  |  |  |  |
| **10.** |  |  |  |  |