

HEALTH & FITNESS TRACKER

Resting Heart _____

EXERCISE

Week of _____

-

Year _____

Cardio	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Exercise							
Time / Distance							
Exercise							
Time / Distance							
Exercise							
Time / Distance							

Strength	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Upper / Lower / Both							
Circuit							
Other							

Notes _____