





FOOD JOURNAL FOR \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

Month, Day, Year			
<b>BREAKFAST</b>	<b>LUNCH</b>	<b>DINNER</b>	<b>SNACK #1</b>
Time:	Time:	Time:	Time:
Location:	Location:	Location:	Location:
I'm with:	I'm with:	I'm with:	I'm with:
			I ate:
I ate:	I ate:	I ate:	
			I drank:
			I'm feeling:
I drank:	I drank:	I drank:	I'm thinking about:
			<b>SNACK #2</b>
			Time:
I'm feeling:	I'm feeling:	I'm feeling:	Location:
			I'm with:
			I ate:
I'm thinking about:	I'm thinking about:	I'm thinking about:	I drank:
			I'm feeling:
			I'm thinking about:

Month, Day, Year			
<b>BREAKFAST</b>	<b>LUNCH</b>	<b>DINNER</b>	<b>SNACK #1</b>
Time:	Time:	Time:	Time:
Location:	Location:	Location:	Location:
I'm with:	I'm with:	I'm with:	I'm with:
			I ate:
I ate:	I ate:	I ate:	
			I drank:
			I'm feeling:
I drank:	I drank:	I drank:	I'm thinking about:
			<b>SNACK #2</b>
			Time:
I'm feeling:	I'm feeling:	I'm feeling:	Location:
			I'm with:
			I ate:
I'm thinking about:	I'm thinking about:	I'm thinking about:	I drank:
			I'm feeling:
			I'm thinking about:



EXERCISE JOURNAL FOR \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ WEEK OF \_\_\_\_\_

DATE	DATE	DATE	DATE	DATE	DATE	DATE
Time:	Time:	Time:	Time:	Time:	Time:	Time:
Location:	Location:	Location:	Location:	Location:	Location:	Location:
Type of Workout:	Type of Workout:	Type of Workout:	Type of Workout:	Type of Workout:	Type of Workout:	Type of Workout:
Duration/Intensity:	Duration/Intensity:	Duration/Intensity:	Duration/Intensity:	Duration/Intensity:	Duration/Intensity:	Duration/Intensity:
How I felt before:	How I felt before:	How I felt before:	How I felt before:	How I felt before:	How I felt before:	How I felt before:
How I felt after:	How I felt after:	How I felt after:	How I felt after:	How I felt after:	How I felt after:	How I felt after:
Workout Notes:	Workout Notes:	Workout Notes:	Workout Notes:	Workout Notes:	Workout Notes:	Workout Notes: