



Makeoverfitness

Exercise

&

Meal Journal



Date: \_\_\_/\_\_\_/\_\_\_ Weight: \_\_\_\_\_

Food/Beverage	Fat (g)	Carbs (g)	Fiber	Protein	Calories	
<b>Breakfast</b>	Amount					
<b>Snack</b>	Amount					
<b>Lunch</b>	Amount					
<b>Snack</b>	Amount					
<b>Dinner</b>	Amount					

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ Weight: \_\_\_\_\_

CARDIOVASCULAR (Exercise)	INTENSITY (Circle below)			TOTAL DURATION (Minutes)				
	Low	Med	High					
	Low	Med	High					
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RESISTANCE TRAINING	Set 1		Set 2		Set 3		Set 4	
EXERCISE	Reps	WT	Reps	WT	REPS	WT	REPS	WT
STRETCHES/ COOL DOWN					TOTAL DURATION (Minutes)			

Notes:

My Mood (circle): Great Good Ok Not Great

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