

Date: _____

My Fitness Journey

Cardiovascular :

Exercise	Level		Notes to Self						
			Sunday	Monday	Tuesday	Wed	Thursday	Friday	Saturday
		TIME							
		TIME							
		TIME							
		TIME							
		TIME							

Strength Training:

Exercise	Weight	Beginner Routine		
		Reps	Sets	Notes

Flexibility:

Stretch	Seconds

Notes:

A Fitness Tool provided as a courtesy by GoWorkoutMom.com