THRIVE TOTAL FITNESS

Thrive Total Fitness
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Workout Log

Date: _____

Measurements: Week 1

Shoulders:	_____	Hips:	_____
Chest:	_____	Thigh:	_____
Biceps:	_____	Calf:	_____
Waist:	_____		

Workout Type:

FITNESS ASSESSMENT

Push-ups _____ **Timed Mile Run** _____

Crunches _____ **Flexibility Reach Test** _____

Plank _____ **Explosive Power Test**_____

Rate of Perceived Exertion (RPE)	Mood Before ☺ ☹	Mood After ☺ ☹

What I found easy:

What I found hard:

Energy Level (1-10)	My pre workout meal was:	My post workout meal was:
Before:		
After:		

Comments:

Use this space to document how you feel. What muscles feel worked? Is there any pain? Do you feel like you could have done more? Are you satisfied with your progress? Did you meet your goals today? Make note of any gains – mental, emotional and physical.