

Thrive Total Fitness
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Workout Log

Date: _____

Workout Type:		
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.

Meal, Snack & Hydration Log (optional):