



Name: _____

Activities: _____

Goal Minutes:



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____
Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____
Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____
Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____	Activities: Time: _____ _____



Developed by:
Connie C. Johnson, PT, MS

I met my exercise goal for this month!

Minutes