

DATE: ___/___-___/___

A HEALTHIER ME
 FITNESS *Planner*

MONDAY		TUESDAY	
FOOD	ACTIVITY	FOOD	ACTIVITY
B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 	B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 
WEDNESDAY		THURSDAY	
FOOD	ACTIVITY	FOOD	ACTIVITY
B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 	B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 
FRIDAY		SATURDAY	
FOOD	ACTIVITY	FOOD	ACTIVITY
B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 	B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 
SUNDAY		HEALTH GOALS	
FOOD	ACTIVITY	1. _____ 2. _____ 3. _____ 4. _____ 5. _____	
B BREAKFAST L LUNCH D DINNER S SNACKS	TYPE: _____ DURATION: _____ 		