

Weekly Log

Name: _____

Target Calories per Day: _____

Week of: _____

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Breakfast							
Morning Snack							
Lunch							
Afternoon Snack							
Dinner							
Evening Snack							
Fluid Intake (8 oz)	□□□□□□□□	□□□□□□□□	□□□□□□□□	□□□□□□□□	□□□□□□□□	□□□□□□□□	□□□□□□□□
EXERCISE Activity/Intensity Duration							