

Fitness Tracker



Athlete Name: _____

WEEK 6

Activity
Topic

Did you
complete
today's
activity?

Were you
physically
active today?
(minutes/hours)

MONDAY

Reflection of your
participation during
the challenge.

☐ Yes
☐ No

Minutes
 Hours

TUESDAY

Eat 5 fruits and
vegetables.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Minutes
 Hours

WEDNESDAY

Practice
Emotional
Wellness!

☐ Yes
☐ No

Minutes
 Hours

THURSDAY

Drink 8 cups of
water throughout
today.

☐ 1 ☐ 2 ☐ 3 ☐ 4
☐ 5 ☐ 6 ☐ 7 ☐ 8

Minutes
 Hours

FRIDAY

Fit Friday!

☐ Yes
☐ No

Minutes
 Hours

SATURDAY

Surprise Saturday!

☐ Yes
☐ No

Minutes
 Hours

SUNDAY

Stretching
Sunday!

☐ Yes
☐ No

Minutes
 Hours