

Fitness My Way

My Fitness Journal





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Month Of:

J A N U A R Y



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😡 😢

😍 😞 😐 😡 😝 😐

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

○

○

○

MEASUREMENTS

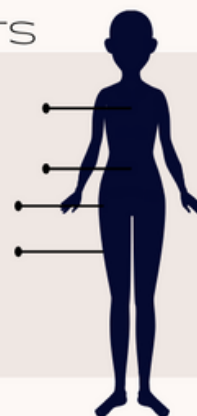
Chest:

Waist:

Hips:

Thigh:

Weight:



WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

○

○

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○

MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

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MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

A series of horizontal lines for writing, organized into eight pairs. Each pair is preceded by a black dot on the left margin, which is aligned with a grey spiral binding on the far left of the page.

Month Of:

F E B R U A R Y



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😞 😞

😍 😏 😐 😡 😝 😐

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

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○

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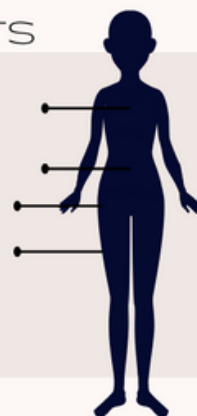
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

○

○

○

○

MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1

WEEK 2

WEEK 3

WEEK 4

WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

A series of horizontal lines for writing, organized into eight pairs. Each pair is preceded by a black dot on the left margin, which is aligned with a grey spiral binding on the far left of the page.

Month Of:

HELLO
March



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?



MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

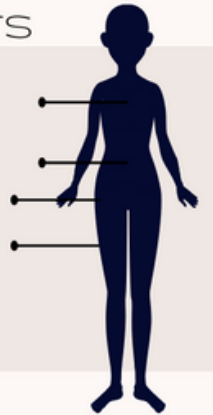
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes : _____



Personal
Thoughts:



Date:

A series of horizontal lines for writing, organized into eight pairs. Each pair is preceded by a black dot on the left margin, which is aligned with a grey spiral binding on the far left of the page.

Month Of:



**APRIL
FOOL'S
DAY**

Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?



MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

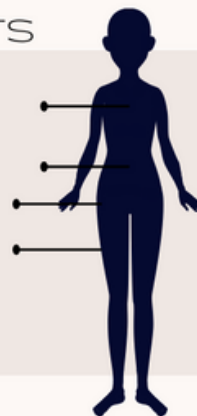
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes : _____



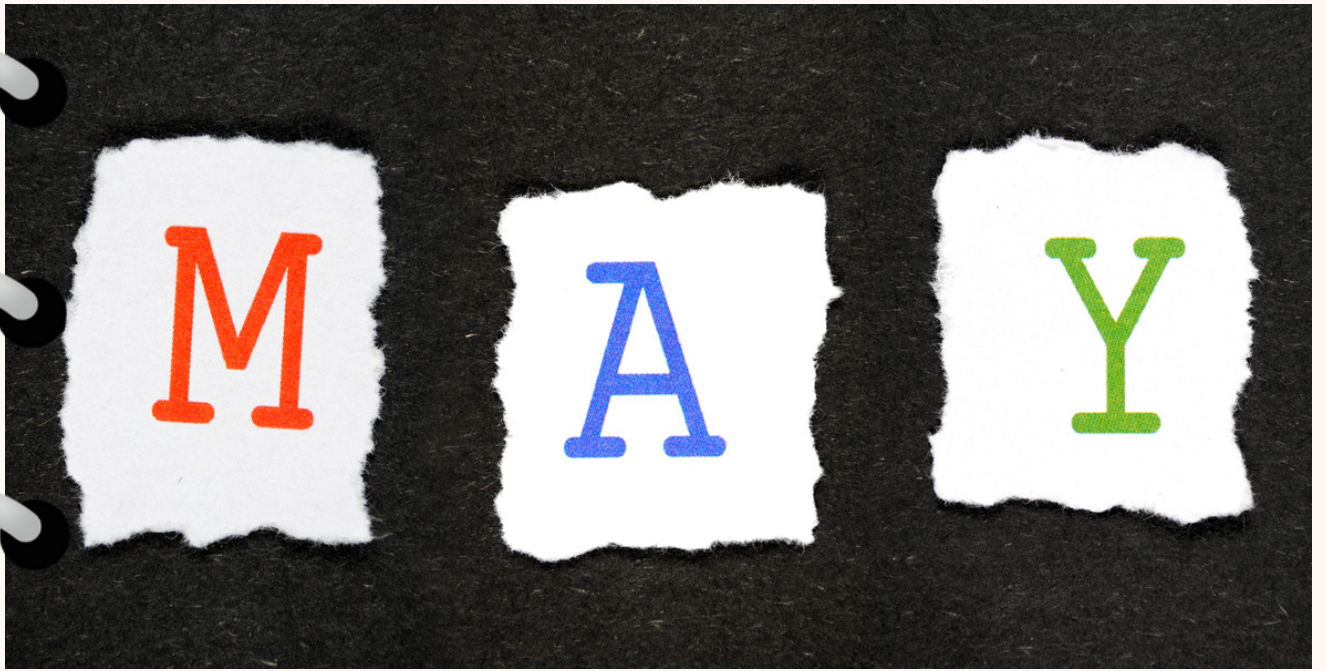
Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom lines) for writing practice.

Month Of:



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?



MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

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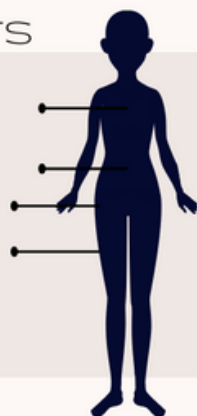
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

☐

☐

☐

☐

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

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MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes :



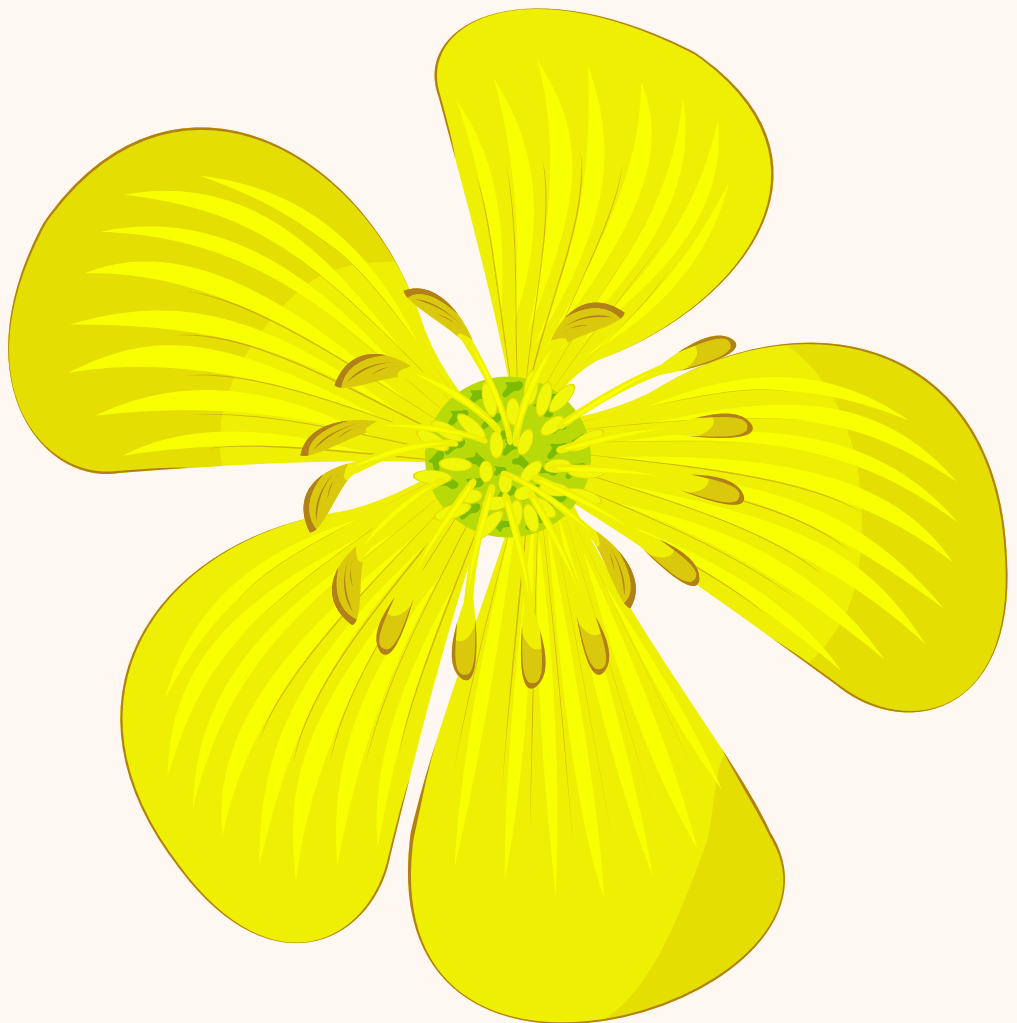
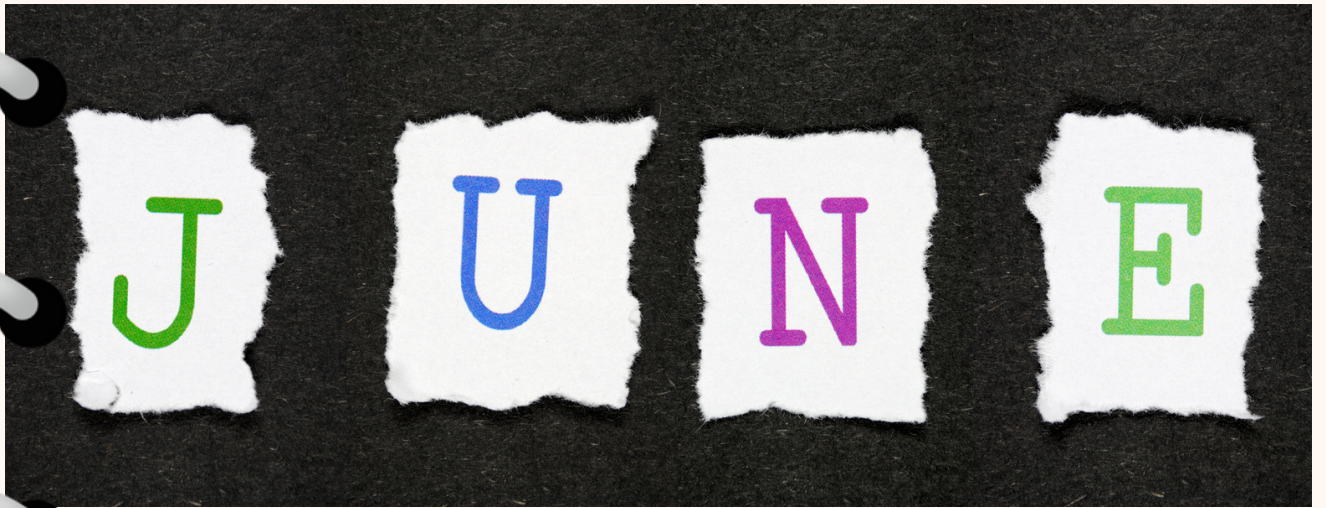
Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom) for writing practice.

Month Of:















Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?





MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

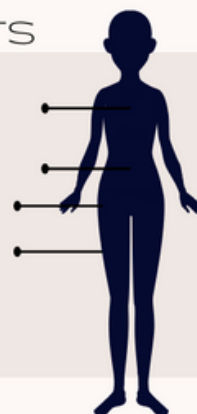
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

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MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom lines) for writing practice.

Month Of:

HELLO

July















Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?





MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

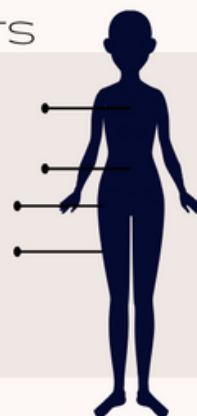
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

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MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes : _____



Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom) for writing practice.

Month Of:

AUGUST



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😞 😞

😍 😞 😐 😡 😝 😐

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

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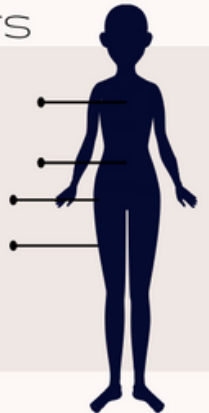
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

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MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

Mo Tu We Th Fr Sa Su

Habit

Goal

Done

Reward

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MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes : _____



Personal
Thoughts:



Date:

A series of horizontal lines for writing, organized into eight pairs. Each pair is preceded by a black dot on the left margin, which is aligned with a grey spiral binding on the far left of the page.

Month Of:

HELLO
September



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😞 😱

😍 😏 😐 😡 😜 😐

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

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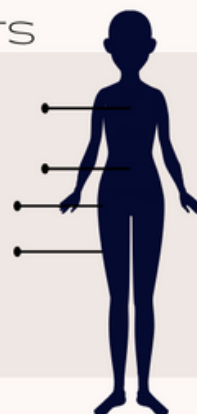
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

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○

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MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Mo Tu We Th Fr Sa Su

Habit	
Goal	
Done	
Reward	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom) for writing practice.

Month Of:

HELLO

October















Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?





MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

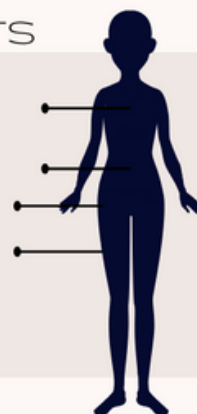
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

MY OVERALL PROGRESS THIS MONTH:



Monthly Habit Tracker

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1

WEEK 2

WEEK 3

WEEK 4

WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

A series of horizontal lines for writing, organized into eight pairs. Each pair is preceded by a black dot on the left margin, which is aligned with a grey spiral binding on the far left of the page.

Month Of:

HELLO
November



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😡 😱

😄 😏 😬 😠 😜 😇

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

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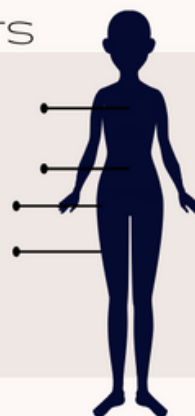
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

○

○

○

○

MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

		Mo	Tu	We	Th	Fr	Sa	Su
Habit								
Goal								
Done								
Reward								

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes : _____



Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom) for writing practice.

Month Of:

HELLO

December



Workout Check-Ins

DATE _____

REMINDERS:

ANY MOOD CHANGES?

😊 😊 😐 😞 😡 😱

😍 🙄 🤔 😠 😜 😬

MY GOALS:

3 WORKOUTS I WANT TO TRY THIS MONTH:

○

○

○

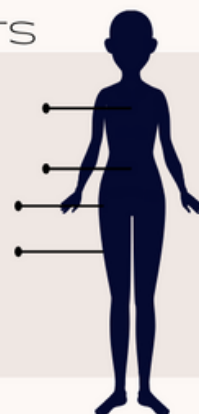
MEASUREMENTS

Chest:

Waist:

Hips:

Thigh:



Weight:

WORKOUT I'M STICKING WITH OR STAYING AWAY FROM:

○

○

○

○

MY OVERALL PROGRESS THIS MONTH:

★ ★ ★ ★ ★

Monthly Habit Tracker

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Habit

Goal

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Reward

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Reward

www.realisticreads.com

MONTHLY MEAL PREP IDEAS

DATE :

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5

RECIPES I ENJOYED:

Notes :



Personal
Thoughts:



Date:

Handwriting practice lines consisting of 10 sets of three horizontal lines (top, middle, and bottom) for writing practice.

