

METABOLIC JUMPSTART

Challenge

NAME:

DATE:

TODAY'S WORKOUT:

BREATHING/MEDITATION:

yes no

SLEEP: (CIRCLE # OF HOURS)

1 2 3 4 5 6 7 8

BONUS ACTIVITIES:

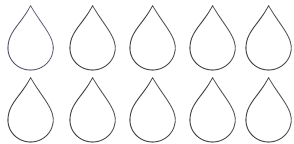
BREAKFAST:

LUNCH:

DINNER:

SNACKS:

WATER:



HOW DO I FEEL TODAY?
(CIRCLE # OF STARS)



NOTES:

*don't forget to include protein at each meal