

# Week 1 food and activity chart



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Unplanned snacks or drinks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oops!	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Your 5 a day	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aerobic exercise mins	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Strength exercise mins	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Start of the week**

Weight	Waist
kg/lbs	cms/in



Aerobic exercise:

10 mins  30 mins  60 mins  90 mins  120 mins  150 mins +

**Weekly summary**

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



Strength exercise:

mon  tues  wed  thurs  fri  sat  sun

1 session on 2 or more days a week

**End of the week**

Weight	Waist
kg/lbs	cms/in



# Week 1 food and activity chart

Day	Food	Total calories:	Food	Total calories:	Food	Total calories:	Food	Total calories:	Food	Total calories:	Food	Total calories:
<b>Mon</b>	<b>Food</b>	Total calories: <b>1,363</b>	<b>Food</b>	Total calories: <b>1,391</b>	<b>Food</b>	Total calories: <b>1,516</b>	<b>Food</b>	Total calories: <b>1,305</b>	<b>Food</b>	Total calories: <b>1,357</b>	<b>Food</b>	Total calories: <b>1,710</b>
		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input checked="" type="checkbox"/>
		<i>Ooops! Unplanned snacks or drinks</i>		<i>Ooops! Unplanned snacks or drinks</i>		<i>Ooops! Unplanned snacks or drinks</i>		<i>Ooops! Unplanned snacks or drinks</i>		<i>Ooops! Unplanned snacks or drinks</i>		<i>Ooops! Unplanned snacks or drinks</i>
		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		<b>Your 5 a day</b> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
	<b>Activity</b>	Total minutes: <b>15</b>	<b>Activity</b>	Total minutes: <b>15</b>	<b>Activity</b>	Total minutes: <b>75</b>	<b>Activity</b>	Total minutes: <b>15</b>	<b>Activity</b>	Total minutes: <b>60</b>	<b>Activity</b>	Total minutes: <b>40</b>
		Aerobic exercise <b>walk</b> 15 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Aerobic exercise <b>walk</b> 15 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Aerobic exercise <b>walk</b> 15 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Aerobic exercise <b>walk</b> 15 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Aerobic exercise <b>zumba</b> 60 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Aerobic exercise <b>swim</b> 20 mins <input checked="" type="checkbox"/> <input type="checkbox"/>
		Strength exercise <input checked="" type="checkbox"/> <input type="checkbox"/>		Strength exercise <input checked="" type="checkbox"/> <input type="checkbox"/>		Strength exercise <b>yoga</b> 60 mins <input checked="" type="checkbox"/> <input type="checkbox"/>		Strength exercise <input checked="" type="checkbox"/> <input type="checkbox"/>		Strength exercise <input checked="" type="checkbox"/> <input type="checkbox"/>		Strength exercise <b>gardening</b> 20 mins <input checked="" type="checkbox"/> <input type="checkbox"/>
		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>		<input checked="" type="checkbox"/> <input type="checkbox"/>
		<b>Start of the week</b>										<b>End of the week</b>
		Weight <b>172lbs</b> kg/lbs										Weight <b>170lbs</b> kg/lbs
		Waist <b>44in</b> cms/in										Waist <b>44in</b> cms/in



Aerobic exercise:

10 mins  30 mins  60 mins  90 mins  120 mins  150 mins +



Strength exercise:

mon  tues  wed  thurs  fri  sat  sun

1 session on 2 or more days a week

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



<b>End of the week</b>	
Weight <b>170lbs</b> kg/lbs	Waist <b>44in</b> cms/in