

# Weekly Home Workout Plan

Plan your week · check it off · reflect & improve

Week of: \_\_\_\_\_

Fitness Goal: \_\_\_\_\_

Available Time / Day: \_\_\_\_\_

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____	<input type="checkbox"/> Workout: _____
<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____	<input type="checkbox"/> Duration: _____
<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed	<input type="checkbox"/> Intensity: ✓ Done <input type="checkbox"/> Completed
Steps: _____	Steps: _____	Steps: _____	Steps: _____	Steps: _____	Steps: _____	Steps: _____
Water: _____	Water: _____	Water: _____	Water: _____	Water: _____	Water: _____	Water: _____

## WEEKLY REVIEW

Weekly Wins ■

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What to improve next week

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