Month: \_\_\_\_\_ LOG #(1-12) \_\_\_\_\_ Student Name e-mail

Date: Date: Date:

Parent signature\_\_\_\_\_ Parent e-mail

Date: Date: Date:

Mode	Monday	Tuesday	Wednesday	Thursday	Friday	Sat/Sun
Resting Heart		-				
Rate (bpm)						
before exercise						
(ex: 70 beats						
per minute)						
Aerobic						
ActivityType –						
what you did						
(3 x week)						
<b>Duration</b> 30-60						
Minutes						
Exercise Heart						
Rate: during or						
right after						
activity 60-90%						
of max. <mark>130-</mark>						
180bpm						
<b>Recovery Heart</b>						
Rate (bpm)take						
three min. after						
exercise.						
Other: (i.e.						
weight lifting,						
stretching,						
push-ups, sit-						
ups, yoga)						
Duration						
Minutes						

Reflection Journal: (This section is worth at least **20 points**.)

In a couple paragraphs, reflect on activities performed this week. Explain:

- 1. The positive and/or negative aspects of your workouts this week.
- 2. How did your heart rate change throughout the exercise? Did that pattern change from workout to workout?
- 3. How did your breathing change throughout the exercise? Did that pattern change from workout to workout?
- 4. How did the feeling in your muscles change throughout the exercise? Did that pattern change from workout to workout?