

Name _____ My weight _____

Dates (month/day)

Fill in the blocks for minutes of exercise and intensity level (see chart, pages 2-3) Click box for any included this week.

Aerobic (Click any engaged in this wk.)

- Walk/hike Jog
- Bike Water exercise **Minutes**
- Racket Group exercise **Intensity**
- Martial arts Dance (Estimated average)
- Team sport Machine
- Other _____

	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	
Minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pts.
Intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Strength (Click engaged this wk.)

- Strength **Minutes**
- Power (strength x acceleration) **Intensity**

Minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pts.
Intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Skilled Activity that addresses balance, agility, coordination, mobility, or smoothness of movement.

- Minutes**
- Intensity**

Minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pts.
Intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Stretching, range of motion, or foam rolling/ self-myofascial release

- Minutes**
- Intensity**

Minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pts.
Intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Brain-specific exercise

Complex and novel learning activity—language, logic, math, music, art, or navigation (e.g., learning new travel routes), interpersonal interaction, puzzles, brainy games. (Physical exercise is addressed above.)

- On a scale of 1 to 10, how I felt while exercising for the week overall (1 = awful; 5 = so-so; 10 = great)
- Minutes**
- Intensity**

Minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pts.
Intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

All numbers below are automatically entered

Average number of calories burned per day (Total/7)

F
M

Average no. of physical minutes of exercise per day (Total divided by 7)

Total number of points earned for the week (not including brain)

Total calories burned F _____ M _____

Total week's physical minutes _____

Description	Intensity	Description	Activity	Intensity	Description
Aerobics class	5	Low impact	Jog/run	14	7 minute mile
Aerobics class	7	High impact	Jog/run	20	5 minute mile
Aerobics class, step	8.5	6-8" step	Jog/run upstairs	15	
Aerobics class, step	10	10-12" step	Jog/run in place	8	
Aerobics - Tae Bo	10	Vigorous	Jog/run--Sprinting	22	Full speed
Badminton	4.5	Social	Martial arts	4	Tai Chi
Badminton	7	Competitive, skilled	Martial arts	10	TKD, karate, judo
Baseball, softball	5		Pilates	6	
Basketball	4.5	Shooting baskets	Ping pong	4	
Basketball	8	Game	Racquetball	7	Casual
Basketball	6.5	Wheelchair	Racquetball	10	Competitive, skilled
Bicycling	10	Mountain biking; BMX	Range of motion	3	
Bicycling	4	Leisure; < 10 mph	Rock climbing	11	
Bicycling	6	Light; 10-11.9 mph	Rollerblading	10	Vigorous
Bicycling	8	Moderate; 12-13.9 mph	Rope jumping	8	Slow
Bicycling	10	Fast; 14-15.9 mph	Rope jumping	10	Moderate
Bicycling	12	16-19 mph	Rope jumping	12	Fast
Bicycling	16	> 20 mph	Rowing machine	3.5	Light
Bowling	2		Rowing machine	7	Moderate
Calisthenics	3.5	Light	Rowing machine	8.5	Vigorous
Calisthenics	8	Pushups, pullups, etc	Rowing machine	12	Very vigorous
Canoe, kayak	7	Moderate effort	SCUBA diving	7	General
Canoe, kayak	12	Vigorous effort	SCUBA diving	16	Against the current
Dancing	3	Slow, ballroom	Skateboarding	5	
Dancing	5.5	Disco, folk, square	Skating, ice/roller	7	General
Dancing	8	Very fast	Skating, ice/roller	9	Fast
Dancing	9	Swing dancing	Skiing, X-country	8	Moderate
Dancing	9	Zumba	Skiing, X-country	9	Vigorous
Football	8	Touch, flag	Skiing, X-country	16.5	Maximum effort
Golf	3.5	General, with cart	Skiing, downhill	6	Moderate
Golf	4.5	General, no cart	Skiing, downhill	8	Vigorous
Handball	12		Skin diving	7	General
Hiking, hunting	5	Walking	Skin diving	12.5	Moderate
Jog/run	8	12 minute mile	Skin diving	16	Fast
Jog/run	10	10 minute mile	Snorkeling	5	
Jog/run	12.5	8 minute mile	Soccer	7	Casual

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Activity	Intensity	Description
Soccer	10	Competitive, skilled
Strength training	6	Machines, free weights
Strength training	8	Intensive
Strength training	8	Circuit (continuous)
Stretch for flexibility	3	
Surf, bodyboard	3	
Swimming	4	Water aerobics
Swimming	6	Leisurely
Swimming	8	Slow crawl; sidestroke
Swimming	10	Fast; vigorous
Swimming	11	Butterfly
Tennis	6	Doubles
Tennis	8	Singles
Trampoline	3.5	
Volleyball	4	Recreational
Volleyball	8	Competitive, skilled
Volleyball, beach	8	
Walking	2.5	30 minute mile pace
Walking	3	25 minute mile pace
Walking	3.5	20 minute mile pace
Walking	4	15 minute mile pace
Walking, power	8	13 minute mile pace
Walking, upstairs	6	
Walk, upstairs, with 25 lbs.	8	
Walk, upstairs, with 50 lbs.	10	
Walk, stair machine	9	
Yoga	4	
Other Activities	Intensity	
Light garden; weeding	2	
Heavy garden; digging	4	
Gen'l house cleaning	3	
Mow lawn-push power	4	
Mow lawn-push hand	6	
Shoveling snow, dirt	7	
Chopping wood	7	
Other - you judge, by comparing with the above		

General low intensity activities

Activity	Intensity
Standing in line at the movies	1.2
Reading while sitting	1.3
Playing cards, board games	1.5
Sewing, knitting, macrame	1.5
Talking while sitting	1.5
Taking a class; studying	1.8
Talking while standing	1.8
Writing a novel, poetry, letter	1.8
Attending synagogue, church, mosque	2
Driving a car	2
Playing the flute	2
Washing dishes	2.3
Billiards, pool, or croquet	2.5
Carpet sweeping	2.5
Change light bulb, pump gas	2.5
Cooking; prepare or serve food	2.5
Dressing, undressing	2.5
Fishing from a boat	2.5
Light cleaning	2.5
Mowing the lawn on a riding mower	2.5
Paint - acrylics, oils, water colors	2.5
Playing the violin, piano, trumpet	2.5
Play wall or lawn darts	2.5
Stand and play with children	2.8
Sailing, leisurely	3