2008 Physical Activity Guidelines for Americans Be Active Your Way

Keeping track of what you do each week

Make copies of the forms on the next page to write down your goals and track your activities each week. There are examples below.

The first form is for aerobic activities. The second form is for strengthening activities. Be active **your way** by choosing activities you enjoy!



Tracking works!

"I made a copy of the tracking forms and keep them handy to fill out each day. Know what? When I fill out the forms—it's easier to reach my weekly goal."

Example: My aerobic activities this week

My goal is to do aerobic activities for a total of 2 hours and 30 minutes this week.

| | | When I did it and for how long | | | | | | | |
|--|----------|--------------------------------|--------|--------|-----|--------|--------|--------|---------------------------|
| What I did | Effort | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Total hours or minutes |
| Walked | Moderate | | 30 min | 30 min | | 30 min | | 30 min | 2 hours |
| Biked fast | Vigorous | | | | | | 30 min | | 30 min |
| This is the total number of hours or minutes I did these activities this week: | | | | | | | | | 2 hours |
| | | | | | | | | | and 30 min |

Example: My strengthening activities this week

My goal is to do strengthening activities for a total of 2 days this week.

| | | When I did it | | | | | | | |
|--|-----|---------------|-----|-----|-----|-----|-----|------------|--|
| What I did | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Total days | |
| Sit-ups | Yes | | | | | | | 1 day | |
| Stretch bands | | | | Yes | | | | 1 day | |
| This is the total number of days I did these activities this week: | | | | | | | | | |







Be active your way by choosing activities you enjoy!

My aerobic activities this week

My goal is to do aerobic activities for a total of _____hours and _____minutes this week.

| | | When I did it and for how long | | | | | | | | | |
|--|--------|--------------------------------|-----|-----|-----|-----|-----|-----|---------------------------|--|--|
| What I did | Effort | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Total hours or minutes | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| This is the total number of hours or minutes I did these activities this week: | | | | | | | | | | | |

My strengthening activities this week

My goal is to do strengthening activities for a total of _____ days this week.

| When I did it | | | | | | | | |
|--|-----|-----|---|---|--|---|--|--|
| Mon | Tue | Wed | Thu | Fri | Sat | Sun | Total days | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| This is the total number of days I did these activities this week: | | | | | | | | |
| | | | Image: second | MonTueWedThuImage: Strain | MonTueWedThuFriImage: Strain S | MonTueWedThuFriSatImage: Second sec | MonTueWedThuFriSatSunImage: Second stress stres | |

For more information, visit www.healthfinder.gov/getactive

Be Active, Healthy, and Happy!