

Name \_\_\_\_\_ Total Pts= \_\_\_\_\_

Start date Monday, May 26

End date Sunday, July 19

<b>WEEK #1</b>	<b>Mon</b>	<b>Tues</b>	<b>Wed</b>	<b>Thurs</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>
Repeat AFFIRMATIONS (5 pts)							
WATER: 1 pt 32 oz 3 pt 64 oz							
STOP EATING/DRINKING BEFORE 9p: 5 pts							
FRUIT: 1 pt per serving Max 2 servings							
VEGETABLES: 2 pt per serving No limit.							
PROTEIN: 1 pt per meal Max 3 pts							
NO SUGARY DESSERTS OR CANDY: 5 pts							
NO CHIPS, FRENCH FRIES OR OTHER JUNK FOOD: 5 pts							
ALCOHOL (LIMIT 1) Subtract 1 pt for number of drinks over limit							
BREAD/MUFFIN (LIMIT 1 SLICE) Subtract 1 pt for number of slices over limit							
EXERCISE: 5 pts – 30 min 7 pts – 45 min or more (only 5 days a week)							
SLEEP: 1 pt: 6+ hours of sleep							
<b>TOTAL</b>							