

Week 1 food and activity chart

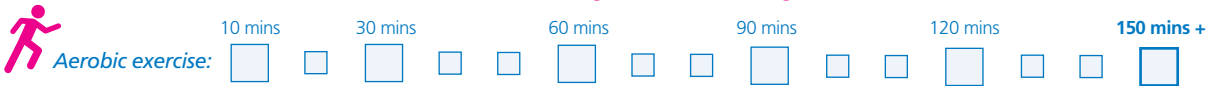


Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <div></div>	Total calories: <div></div>	Total calories: <div></div>	Total calories: <div></div>	Total calories: <div></div>	Total calories: <div></div>	Total calories: <div></div>
<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>	Your 5 a day <div><div>✓</div><div>✓</div><div>✓</div><div>✓</div><div>✓</div></div>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <div></div>	Total minutes: <div></div>	Total minutes: <div></div>	Total minutes: <div></div>	Total minutes: <div></div>	Total minutes: <div></div>	Total minutes: <div></div>
Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>	Aerobic exercise mins <div></div>
<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>
Strength exercise mins <div></div>	Strength exercise mins <div></div>	Strength exercise mins <div></div>	Strength exercise mins <div></div>	Strength exercise mins <div></div>	Strength exercise mins <div></div>	Strength exercise mins <div></div>
<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>	<div><div>✓</div><div>✗</div></div>

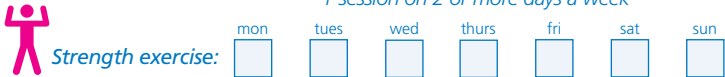
Weekly summary

Start of the week

Weight	Waist
kg/lbs	cms/in



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



End of the week

Weight	Waist
kg/lbs	cms/in

# Week 1 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
Food	Food	Food	Food	Food	Food	Food
Total calories: <b>1,363</b>	Total calories: <b>1,391</b>	Total calories: <b>1,516</b>	Total calories: <b>1,305</b>	Total calories: <b>1,357</b>	Total calories: <b>1,710</b>	Total calories: <b>1,309</b>
<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
	<b>crisps 171cal</b>	<b>2x choc diges 172cal</b>		<b>kit kat 107cal</b>	<b>glass of wine 130cal</b> <b>ginger cake 147cal</b>	
Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Activity	Activity	Activity	Activity	Activity	Activity	Activity
Total minutes: <b>15</b>	Total minutes: <b>15</b>	Total minutes: <b>75</b>	Total minutes: <b>15</b>	Total minutes: <b>60</b>	Total minutes: <b>40</b>	Total minutes: <b>60</b>
Aerobic exercise mins <b>walk 15</b>	Aerobic exercise mins <b>walk 15</b>	Aerobic exercise mins <b>walk 15</b>	Aerobic exercise mins <b>walk 15</b>	Aerobic exercise mins <b>zumba 60</b>	Aerobic exercise mins <b>swim 20</b>	Aerobic exercise mins <b>walk 60</b>
<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
Strength exercise mins	Strength exercise mins	Strength exercise mins	Strength exercise mins	Strength exercise mins	Strength exercise mins	Strength exercise mins
		<b>yoga 60</b>			<b>gardening 20</b>	
<input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>

## Weekly summary

### Start of the week

Weight	Waist
<b>172lbs</b>	<b>44in</b>
kg/lbs	cms/in



Aerobic exercise:



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



Strength exercise:



### End of the week

Weight	Waist
<b>170lbs</b>	<b>44in</b>
kg/lbs	cms/in

Week 2 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary



Aerobic exercise:

10 mins	30 mins	60 mins	90 mins	120 mins	150 mins +
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



Strength exercise:

mon	tues	wed	thurs	fri	sat	sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1 session on 2 or more days a week

Start of the week

Weight

Waist

kg/lbs

cms/in

End of the week

Weight

Waist

kg/lbs

cms/in

Week 3 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



End of the week	
Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

# Week 4 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

## Weekly summary



Aerobic exercise:

10 mins 30 mins 60 mins 90 mins 120 mins 150 mins +  
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



Strength exercise:

1 session on 2 or more days a week  
mon tues wed thurs fri sat sun  
☐ ☐ ☐ ☐ ☐ ☐ ☐

### Start of the week

Weight

Waist

kg/lbs

cms/in

### End of the week

Weight

Waist

kg/lbs

cms/in

# Week 5 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>	<div>Food</div> <div>Total calories:</div> <div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div>Oops!</div> <div>Unplanned snacks or drinks</div>
<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Your 5 a day</div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>
<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>	<div>Activity</div> <div>Total minutes:</div> <div></div> <div><div>Aerobic exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div> <div><div>Strength exercise</div><div>mins</div></div> <div><div><input checked="" type="checkbox"/></div><div><input checked="" type="checkbox"/></div></div>

## Weekly summary

Start of the week

Weight

kg/lbs

Waist

cms/in

Aerobic exercise:

10 mins

30 mins

60 mins

90 mins

120 mins

150 mins +

☐

☐

☐

☐

☐

☐

☐

☐

☐

☐

☐

☐

☐

Strength exercise:

1 session on 2 or more days a week

mon

tues

wed

thurs

fri

sat

sun

☐

☐

☐

☐

☐

☐

☐

End of the week

Weight

kg/lbs

Waist

cms/in

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track

Week 6 food and activity chart

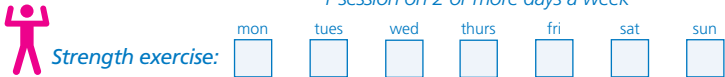


Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



End of the week	
Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

[cms/in](#)



Week 8 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary



Aerobic exercise:

10 mins 30 mins 60 mins 90 mins 120 mins 150 mins +  
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



Strength exercise:

1 session on 2 or more days a week  
mon tues wed thurs fri sat sun  
☐ ☐ ☐ ☐ ☐ ☐ ☐

Start of the week

Weight

Waist

kg/lbs

cms/in

End of the week

Weight

Waist

kg/lbs

cms/in

Week 9 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

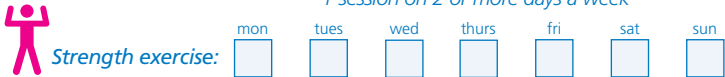
Weekly summary

Start of the week

Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



End of the week

Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

Week 10 food and activity chart



Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day	Your 5 a day
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
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Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary

Start of the week

Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

Aerobic exercise:

10 mins ☐ 30 mins ☐ 60 mins ☐ 90 mins ☐ 120 mins ☐ 150 mins + ☐

Strength exercise:

1 session on 2 or more days a week

mon ☐ tues ☐ wed ☐ thurs ☐ fri ☐ sat ☐ sun ☐

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track

End of the week

Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

Week 11 food and activity chart

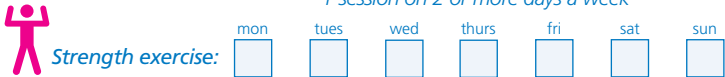


Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>	<b>Food</b>
Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>	Total calories: <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks	Oops! Unplanned snacks or drinks
Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Your 5 a day <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>	<b>Activity</b>
Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>	Total minutes: <input type="text"/>
Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>	Aerobic exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>	Strength exercise mins <input type="text"/>
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

Weekly summary



Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



End of the week	
Weight	Waist
<input type="text"/>	<input type="text"/>
kg/lbs	cms/in

Sun

## Food

*Total calories:*

\_\_\_\_\_



Oops!

Unplanned snacks or drinks

## Your 5 a day



## Activity

*Total minutes:*

\_\_\_\_\_

Aerobic exercise min



Strength exercise min



## End of the week

### Waist

cms/in

kg/lbs



150 mins +

7

Your weight loss tracker - Record your weight and waist size at the start and end of each week to help you stay on track



1 session on 2 or more days a week

sun