

CHOOSE WELL

SUCCESS JOURNAL

MY NAME IS _____
AND I AM COMMITTED TO 50 DAYS OF
CHOOSING WELL.

Dear Participant,

Welcome to the Choose Well Challenge and congratulations on taking the first step toward creating a stronger, healthier, purpose driven version of yourself!

This **50-Day Success Journal** has been thoughtfully designed to support your journey. It's more than just a notebook—this is your daily companion for transformation. Inside, you'll find space to **track your progress, define your goals, reflect on your habits, and stay consistent.** Over the next 50 days, you'll begin to see the power of small, daily choices and how they lead to lasting change.

Throughout this journal, you'll also be guided through the foundational pillars of wellness that support long-term success:

- **Eating with intention:** Food is not just to fuel your body, but it nourishes longevity.
- **Resting with purpose:** Learn how quality sleep is key to mental clarity and physical recovery.
- **Moving with consistency:** Whether you're just starting or fine-tuning your fitness routine, daily movement matters.

These approaches are simple but powerful. And when aligned with your daily devotions, they will enhance every part of your Choose Well Challenge experience.

Use this journal to celebrate progress, learn from setbacks, and stay grounded in your "why." Whether your goals are physical, emotional, or spiritual, this is your space to grow.

You've got 50 days ahead. Make each one count.

With you on the journey,
Choose Well Challenge Team

Before You Begin

Know your why!

Every meaningful journey begins with a purpose, a deeper “why” that fuels your commitment when challenges arise. As you begin this wellness journey, take time to seek God's purpose for your life and health. What are you being called to become, feel, or experience through this program?

The Bible reminds us in 1 Corinthians 10:31, “So whether you eat or drink or whatever you do, do it all for the glory of God.” Your wellness isn’t just about appearance, it’s about honoring the body and life God entrusted to you.

Your “why” might include to gain strength and serve others with more energy, break generational patterns, or step into greater purpose with confidence. Let that God-given “why” guide your choices.

When your heart is aligned with God’s plan, your steps gain power. Write it down. Pray over it. Walk in it.

You were created for more and this is just the
beginning!

Your Choice: Living Water is Water to Live

Water is essential to life. Every cell, tissue, and organ in the body depends on it to function properly. Drinking pure water helps regulate body temperature, supports digestion, flushes out toxins, and keeps skin, joints, and organs healthy. It's a simple yet powerful act of self-care—and stewardship over the body God has entrusted to you.

Scripture reminds us of the value of water and its spiritual symbolism. In John 4:14, Jesus says, "Whoever drinks the water I give them will never thirst." Just as we need Living Water for our souls, our physical bodies thrive when nourished with the water God created.

A practical guideline for optimal hydration is to drink half your body weight in ounces each day. For example, if you weigh 160 pounds, aim for 80 ounces of water daily. This supports energy, mental clarity, and physical endurance—especially during times of intentional wellness practices like exercise, fasting, or detoxification.

Choosing pure, clean water over sugary or processed beverages honors your health and helps you stay aligned with your wellness goals. It's a small habit with a big impact—one that reflects both discipline and gratitude for the gift of life.

The Importance of Movement

Movement is a gift from God. It is an expression of life, strength, and freedom. Our bodies were not meant for stillness alone. Regular physical activity supports heart health, boosts energy, improves mood, strengthens muscles, and enhances mobility. But movement doesn't have to mean intense workouts at the gym. It simply means using your body intentionally each day.

In Acts 17:28, Scripture says, "For in Him we live and move and have our being." This reminds us that movement is a part of our worship and daily living—honoring the temple God gave us (1 Corinthians 6:19–20).

When you move, you align with God's design for vitality and stewardship. Even small motions can awaken your mind and body.

HERE ARE 5 NON-TRADITIONAL WAYS TO MOVE:

1. **Dancing** in your living room or during your personal time of worship
2. **Gardening** or yard work
3. **Playing with your kids or pets** can help preserve your coordination and balance
4. **Stretching or mobility work** during prayer or quiet time
5. **Walking** while listening to Scripture or praise music can keep your WHY in mind

Movement isn't about perfection, it's about presence and purpose. Embrace it as a daily act of gratitude and worship for the body God has fearfully and wonderfully made.

Take Healing to the Next Level

Creating a consistent bedtime routine is a powerful way to support overall wellness, optimize sleep, and allow the body to heal and renew. Intentional rest often takes a backseat to our daily schedules, but sleep is not just a biological need; it is a gift designed by God for restoration.

The Bible speaks clearly about the value of rest. In Genesis 2:2–3, God Himself rested on the seventh day, setting an example for humanity to follow. Having a Sabbath day is not a suggestion, it is a commandment. “Remember the sabbath and to keep it holy.” Exodus 20:11 We are also reminded in Psalm 127:2 that “He gives His beloved sleep,” emphasizing that rest is a divine provision, not a sign of weakness or laziness. Sleep and rest are part of God’s re-creation process.

Establishing a bedtime routine signals the body and mind to begin winding down. Practices such as turning off screens an hour before sleep, dimming the lights, engaging in quiet prayer or reflection, or journaling can reduce stress and prepare the body to enter a state of deep rest. During sleep, the brain clears toxins, the immune system strengthens, and cells repair, making it a crucial time for healing.

Without proper rest, even the best diet or exercise plan will fall short. God designed our bodies to thrive through cycles of work and rest. When we honor those rhythms, we align ourselves with His wisdom.

By creating a nightly routine rooted in peace and intention, we not only enhance our physical health but also nurture our spiritual well-being—resting in the truth that healing begins with surrender and trust in the One who created us.

What three things can you intentionally do differently every evening to change your current bedtime habits and enhance your sleep?

1.

2.

3.

Intermittent Fasting

“Anytime” is NOT the right time to eat

Are you ready to reset your relationship with food, boost your energy, and explore a new approach to wellness? Add in an Intermittent Fasting (IF) method, a powerful, natural rhythm of eating that focuses not on what you eat, but when you eat. This experience offers more than just a method for weight management; it's an opportunity to support your body's natural processes, improve metabolic health, and even promote longevity through mindful timing.

One of the key processes that may occur during intermittent fasting is ketosis. Ketosis is a metabolic state in which the body, deprived of its usual supply of glucose from food, begins to break down fat for energy, producing molecules called ketones. This state often begins after 12–16 hours of fasting and can support fat loss and mental clarity.

Two popular IF schedules include the 14:10 and 16:8 methods. In the 14:10 method, individuals fast for 14 hours and eat during a 10-hour window. This approach is generally easier for beginners and can still offer metabolic benefits. The 16:8 method involves a 16-hour fast followed by an 8-hour eating window, such as eating from 12 p.m. to 8 p.m. This schedule is more intense but may lead to deeper fat burning and longer time in ketosis.

Both methods can be adapted to fit individual lifestyles and goals. Staying hydrated and choosing nutrient-dense foods during eating periods is essential. Before starting IF, it's recommended to consult a healthcare provider, especially for those with medical conditions or specific dietary needs.

For the next 50 days, try intermittent fasting. Choose 12:10 or 16:8 and see for yourself if when you eat changes how you feel. To get the best results, fast all foods and only drink water during your 16 or 14 hours.

WEEK 1

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>
	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 2

SUCCESS JOURNAL

STARTING WEIGHT: _____ END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
---------------	-----	-----	-----	-----	-----	-----	-----

WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
---------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

STEPS	_____	_____	_____	_____	_____	_____	_____
	<i>STEPS</i>	<i>STEPS</i>	<i>STEPS</i>	<i>STEPS</i>	<i>STEPS</i>	<i>STEPS</i>	<i>STEPS</i>

FOOD	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____

WATER INTAKE	_____	_____	_____	_____	_____	_____	_____
	<i>OZ.</i>	<i>OZ.</i>	<i>OZ.</i>	<i>OZ.</i>	<i>OZ.</i>	<i>OZ.</i>	<i>OZ.</i>

INTERMITTENT FAST	: AM	: AM	: AM	: AM	: AM	: AM	: AM
	: PM	: PM	: PM	: PM	: PM	: PM	: PM
	<i>FAST START</i>	<i>FAST START</i>	<i>FAST START</i>	<i>FAST START</i>	<i>FAST START</i>	<i>FAST START</i>	<i>FAST START</i>
	: AM	: AM	: AM	: AM	: AM	: AM	: AM
: PM	: PM	: PM	: PM	: PM	: PM	: PM	
<i>FAST END</i>	<i>FAST END</i>	<i>FAST END</i>	<i>FAST END</i>	<i>FAST END</i>	<i>FAST END</i>	<i>FAST END</i>	

SLEEP	_____	_____	_____	_____	_____	_____	_____
	<i>HOURS</i>	<i>HOURS</i>	<i>HOURS</i>	<i>HOURS</i>	<i>HOURS</i>	<i>HOURS</i>	<i>HOURS</i>

DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 3

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>
	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 4

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>
	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 5

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>
	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 6

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST START</i>
	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>	_____ : <i>AM</i> <i>PM</i> <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEEK 7

SUCCESS JOURNAL

STARTING WEIGHT: _____

END WEIGHT: _____

HABIT TRACKER	MON	TUE	WED	THU	FRI	SAT	SUN
WORKOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEPS	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>	_____ <i>STEPS</i>
FOOD	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
WATER INTAKE	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>	_____ <i>OZ.</i>
INTERMITTENT FAST	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>	_____ : AM PM <i>FAST START</i>
	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>	_____ : AM PM <i>FAST END</i>
SLEEP	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>	_____ <i>HOURS</i>
DEVOTIONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF WEEK REFLECTION

Weekly Meal Plan

MONDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

TUESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

WEDNESDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

THURSDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

FRIDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SATURDAY

Breakfast	Lunch	Dinner	Snacks	Dessert

SUNDAY

Breakfast	Lunch	Dinner	Snacks	Dessert



THE LINK
CHURCH