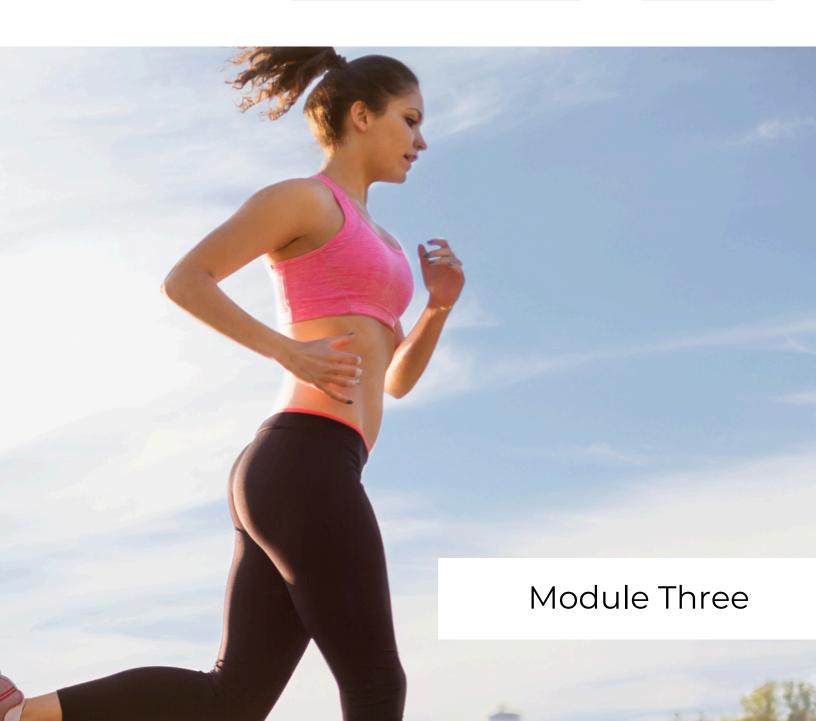
INTEGRATING MOVEMENT FOR METABOLIC HEALTH

ENERGIZING YOUR JOURNEY WITH PHYSICAL ACTIVITY

PARTICIPANT'S NAME: DATE



Fitness Reflection

What types of movement do I enjoy most?
What challenges me about staying active?

Weekly Fitness Plan

Day	Activity Type	Duration	Intensity Level	Notes

Celebrating Movement



What one movement success can I celebrate this week?