

FEMALE INDIVIDUAL PROGRESS CARD

NAME: _____

Week	Weight (lbs)	Body Fat % (optional)	Blood Pressure (optional)	Measurements (optional)	
Initial (10/7)				WAIST	HIP
Week 1 (10/14)					
Week 2 (10/21)					
Week 3 (10/28)	(max 2)				
Week 4 (11/4)	(max 2)				
Week 5 (11/11)	(max 2)				
Week 6 (11/18)	(max 2)			WAIST	HIP
TOTAL					

*Please bring this card each week during official weigh-in