Athlete _____ Date _____

Training

Start _____ Activity _____

Time _____ Distance _____ Climb _____ m RPE ____ /10 Avg HR _____ Max HR _____

Shooting: prone ____ / ____ standing ____ / ____ hits / shots

NOTES

Start _____ Activity _____

Time _____ Distance _____ Climb _____ m RPE ____ /10 Avg HR _____ Max HR _____

Shooting: prone ____ / ____ standing ____ / ____ hits / shots

NOTES

Start _____ Activity _____

Time _____ Distance _____ Climb _____ m RPE ____ /10 Avg HR _____ Max HR _____

Shooting: prone ____ / ____ standing ____ / ____ hits / shots

NOTES

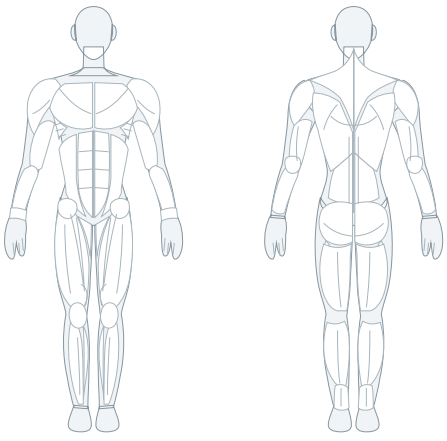
How I feel

Sleep _____ h Resting HR _____

Energy	1	2	3	4	5
Mood	1	2	3	4	5
Soreness	1	2	3	4	5

NOTES

Pain and injuries



BODY FRONT BODY BACK

Mark where it hurts and write how much next to it, 0 to 10.

0	1	2	3	4	5	6	7	8	9	10