CAPITOLA MILL
FITNESS CENTER

Strength training log

Name _____ **Date range** _____

Record only the settings your machine uses. ROM = range of motion.

	Exercise / machine	Back	Seat	ROM	Leg / arm	Date	Date	Date	Date	Date	Date	Date
LOWER BODY	Glute Extension					WT / REPS						
	Leg Press											
	Prone Leg Curl											
	Leg Extension											
	Outer Thigh											
	Inner Thigh											
UPPER BODY	Lateral Raise											
	Biceps Curl											
	Back Extension											
	Triceps Extension											
	Seated Dip											
	Converging Chest Press											
	Rear Delt / Pec Fly											
	Diverging Lat Pulldown											
	Diverging Low Row											
	Converging Shoulder Press											
CORE	Rotary Torso											
	BOSU Vertical Knee Raise											
MULTI	Squat Machine											
	Multi-Purpose Machine											

Cardio & additional activity

Name _____ **Date range** _____

Use the same six workout dates as your strength log. Fill in only the fields that apply.

CARDIO

Equipment / activity	Record	Date:	Date:	Date:	Date:	Date:	Date:	Date:
Peloton Bike	Time (min)							
	Distance + unit							
	Resistance / incline							
Peloton Tread+	Time (min)							
	Distance + unit							
	Resistance / incline							
Peloton Rower	Time (min)							
	Distance + unit							
	Resistance / incline							
Elliptical	Time (min)							
	Distance + unit							
	Resistance / incline							

ADDITIONAL EXERCISES & ACTIVITIES

Equipment / activity	Date:	Date:	Date:	Date:	Date:	Date:
	WT / REPS					

For bodyweight exercises or stretching, leave weight / resistance blank.