

FITNESSGRAM

Personal Fitness Record

Name _____	School _____	Grade _____	Age _____	Ht _____	Wt _____	
		Date: _____	Date: _____		Date: _____	
	Score	HFZ	Score	HFZ	Score	HFZ
Aerobic capacity: _____	_____	_____	_____	_____	_____	_____
Curl-up _____	_____	_____	_____	_____	_____	_____
Trunk lift _____	_____	_____	_____	_____	_____	_____
Upper body strength: _____	_____	_____	_____	_____	_____	_____
Flexibility: _____	_____	_____	_____	_____	_____	_____
Skinfolds:						
Triceps _____	_____	_____	_____	_____	_____	_____
Calf _____	_____	_____	_____	_____	_____	_____
Total _____	_____	_____	_____	_____	_____	_____

Note: HFZ indicates you have performed in the Healthy Fitness Zone.

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		Date: _____	Date: _____		Date: _____	
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Aerobic capacity: _____	_____	_____	_____	_____	_____	_____
Curl-up _____	_____	_____	_____	_____	_____	_____
Trunk lift _____	_____	_____	_____	_____	_____	_____
Upper body strength: _____	_____	_____	_____	_____	_____	_____
Flexibility: _____	_____	_____	_____	_____	_____	_____
Skinfolds:						
Triceps _____	_____	_____	_____	_____	_____	_____
Calf _____	_____	_____	_____	_____	_____	_____
Total _____	_____	_____	_____	_____	_____	_____

Note: HFZ indicates you have performed in the Healthy Fitness Zone.

source: <http://www.pyfp.org/doc/Personal%20Fitness%20Record%20II.pdf>