Surname:
First Name:
Membership No:
Program Renewal Date:
Stretches:
RBS:

Program Comments/Restrictions

Resistance Exercise	Notes	Date													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													
		Set													
		Rep													
		Wgt													