

DAY 1

What time did you get up? _____

Mood: (Bad) 1 2 3 4 5 (Fabulous) _____

Exercise: _____

Water: _____

BREAKFAST

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

LUNCH

Time: _____

What did you eat? _____

DINNER

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

DAY 2

What time did you get up? _____

Mood: (Bad) 1 2 3 4 5 (Fabulous) _____

Exercise: _____

Water: _____

BREAKFAST

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

LUNCH

Time: _____

What did you eat? _____

DINNER

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

DAY 3

What time did you get up? _____

Mood: (Bad) 1 2 3 4 5 (Fabulous) _____

Exercise: _____

Water: _____

BREAKFAST

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

LUNCH

Time: _____

What did you eat? _____

DINNER

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

DAY 4

What time did you get up? _____

Mood: (Bad) 1 2 3 4 5 (Fabulous) _____

Exercise: _____

Water: _____

BREAKFAST

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

LUNCH

Time: _____

What did you eat? _____

DINNER

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

DAY 5

What time did you get up? _____

Mood: (Bad) 1 2 3 4 5 (Fabulous) _____

Exercise: _____

Water: _____

BREAKFAST

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____

LUNCH

Time: _____

What did you eat? _____

DINNER

Time: _____

What did you eat? _____

SNACK

Time: _____

What did you eat? _____



5 DAY FOOD TRACKER

NAME: _____

PHONE NUMBER: _____

EMAIL: _____

Please track all of your food and beverages for 4 days during the week and 1 day on the weekend. Bring your 5 Day Food Tracker to your next consultation.

24 hour cancellation notice is required. Late cancellations may result in a fee.