



Client Work Out Form

Name: _____ Phase: _____

Trainer : _____ Days/Week: _____

CARDIO:	Days / wk:			Duration:			Equipment:			
Warm-Up / Flexibility	Sets	Reps	Duration	Rest	Notes:					
1- SMFR:										
2- Cardio:										
3-Flexibility										
Core & Balance	Sets	S1-Wt	S2-Wt	S3-Wt	Reps	Tempo	Rest	Notes:		
1-										
2-										
3-										
Reactive (Plyometrics)	Sets	S1-Wt	S2-Wt	S3-Wt	Reps	Tempo	Rest	Notes:		
1-										
2-										
3-										
Speed, Agility & Quickness	Sets	S1-Wt	S2-Wt	S3-Wt	Reps	Tempo	Rest	Notes:		
1-										
2-										
3-										
Strength Exercise	Sets	S1-Wt	S2-Wt	S3-Wt	S4-Wt	S5-Wt	Reps	Intensity	Tempo	Rest
1-										
2-										
3-										
4-										
5-										
6-										
7-										
8-										
9-										
10-										

Cool down/Post Workout Flexibility _____

Stretching (static/SMFR): _____

Notes: _____