

# 1. My physical activity at this time



## A Physical activity during a normal week

	MON	TUE	WED	THU	FRI	SAT	SUN
FLEXIBILITY, BALANCE TRAINING, MUSCLE STRENGTHENING ACTIVITIES							
VIGOROUS PHYSICAL ACTIVITY							
OR							
MODERATE PHYSICAL ACTIVITY							

C Compare your physical activity with the recommendation. How well did you meet the recommendation?

Not at all    Not at all    Mostly    Completely or exceeded

\_\_\_\_\_ times

total \_\_\_\_\_ h \_\_\_\_\_ min

## B Light physical activity, breaks in sedentary behaviour, and sleep on a normal day

LIGHT PHYSICAL ACTIVITY	
BREAKS IN SEDENTARY BEHAVIOUR	
RESTORATIVE SLEEP	

Not at all    Not at all    Mostly    Completely or exceeded

## 2. This is how I intend to be physically active



**D** I will take the following into account when planning

**E** Recommendation **F** My plan

COMBINE IN VARIOUS WAYS	Flexibility, balance, muscle strengthening activities 2 times/week	MON	TUE	WED	THU	FRI	SAT	SUN
	Vigorous physical activity 1 h 15 min/week	MON	TUE	WED	THU	FRI	SAT	SUN
	TAI							
	Moderate physical activity 2 h 30 min/week	MON	TUE	WED	THU	FRI	SAT	SUN
	Light physical activity as often as possible							
	Breaks in sedentary behaviour whenever possible							
Restorative sleep sufficiently								