

12 BX Workout Journal

Level 7 – Advanced – Pull ups (Monday & Thursday)

		Exercise		Reps				Total
Date _____	#7	6	6	6	6	0	0	24
	#6	6	6	6	6	6	0	30
Day _____	#5	6	6	6	6	6	0	30
Minutes per set –		1 <input checked="" type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			84

		Exercise		Reps				Total
Date _____	#7							
	#6							
Day _____	#5							
Minutes per set –		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#7							
	#6							
Day _____	#5							
Minutes per set –		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#7							
	#6							
Day _____	#5							
Minutes per set –		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#7							
	#6							
Day _____	#5							
Minutes per set –		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#7							
	#6							
Day _____	#5							
Minutes per set –		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

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12 BX Workout Journal

Level 8 – Advanced – Pull ups (Monday & Thursday)

		Exercise		Reps				Total		
Date	_____	#8	6	6	6	0	0	0	18	
		#7	6	6	6	0	0	0	18	
Day	_____	#6	6	6	6	6	0	0	24	
		#5	6	6	6	6	0	0	24	
Minutes per set –		1	<input checked="" type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		84

		Exercise		Reps				Total		
Date	_____	#8								
		#7								
Day	_____	#6								
		#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#8								
		#7								
Day	_____	#6								
		#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#8								
		#7								
Day	_____	#6								
		#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#8								
		#7								
Day	_____	#6								
		#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#8								
		#7								
Day	_____	#6								
		#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

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12 BX Workout Journal

Level 9 – Advanced – Pull ups (Monday & Thursday)

		Exercise		Reps				Total	
Date	_____	#9	6	6	6	0	0	0	18
		#8	6	6	6	0	0	0	18
Day	_____	#7	6	6	6	6	0	0	24
		#6	6	6	6	6	0	0	24
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	84

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

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12 BX Workout Journal

Level 10 – Elite – Pull ups (Monday & Thursday)

		Exercise		Reps				Total
Date _____	#10	5	5	5	5	5	0	25
	#9	5	5	5	5	0	0	20
Day _____	#8	5	5	5	5	0	0	20
	#7	5	5	5	5	0	0	20
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		85

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

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12 BX Workout Journal

Level 11 – Elite – Pull ups (Monday & Thursday)

		Exercise		Reps				Total	
Date	_____	#11	5	5	5	5	5	0	25
		#10	5	5	5	5	0	0	20
Day	_____	#9	5	5	5	5	0	0	20
		#8	5	5	5	5	0	0	20
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	85

		Exercise		Reps				Total	
Date	_____	#11							
		#10							
Day	_____	#9							
		#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#11							
		#10							
Day	_____	#9							
		#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#11							
		#10							
Day	_____	#9							
		#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#11							
		#10							
Day	_____	#9							
		#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#11							
		#10							
Day	_____	#9							
		#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

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12 BX Workout Journal

Level 12 – Elite – Pull ups (Monday & Thursday)

		Exercise		Reps				Total
Date _____	#12	5	5	5	5	5	0	25
	#11	5	5	5	5	0	0	20
Day _____	#10	5	5	5	5	0	0	20
	#9	5	5	5	5	0	0	20
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	85

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>							Work Out Total	

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12 BX Workout Journal

Level 7 – Advanced – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total		
Date	_____	#7	6	6	6	6	0	0	24	
		#6	6	6	6	6	6	0	30	
Day	_____	#5	6	6	6	6	6	0	30	
Minutes per set –		1	<input checked="" type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		84

		Exercise		Reps				Total		
Date	_____	#7								
		#6								
Day	_____	#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#7								
		#6								
Day	_____	#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#7								
		#6								
Day	_____	#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#7								
		#6								
Day	_____	#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total		
Date	_____	#7								
		#6								
Day	_____	#5								
Minutes per set –		1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

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12 BX Workout Journal

Level 8 – Advanced – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total	
Date	_____	#8	6	6	6	0	0	0	18
		#7	6	6	6	0	0	0	18
Day	_____	#6	6	6	6	6	0	0	24
		#5	6	6	6	6	0	0	24
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	84

		Exercise		Reps				Total	
Date	_____	#8							
		#7							
Day	_____	#6							
		#5							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#8							
		#7							
Day	_____	#6							
		#5							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#8							
		#7							
Day	_____	#6							
		#5							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#8							
		#7							
Day	_____	#6							
		#5							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

		Exercise		Reps				Total	
Date	_____	#8							
		#7							
Day	_____	#6							
		#5							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>								Work Out Total	

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12 BX Workout Journal

Level 9 – Advanced – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total	
Date	_____	#9	6	6	6	0	0	0	18
		#8	6	6	6	0	0	0	18
Day	_____	#7	6	6	6	6	0	0	24
		#6	6	6	6	6	0	0	24
Minutes per set – 1		<input checked="" type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		84

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1		<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1		<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1		<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1		<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

		Exercise		Reps				Total	
Date	_____	#9							
		#8							
Day	_____	#7							
		#6							
Minutes per set – 1		<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	Work Out Total		

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12 BX Workout Journal

Level 10 – Elite – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total
Date _____	#10	5	5	5	5	5	0	25
	#9	5	5	5	5	0	0	20
Day _____	#8	5	5	5	5	0	0	20
	#7	5	5	5	5	0	0	20
Minutes per set – 1		<input checked="" type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			85

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#10							
	#9							
Day _____	#8							
	#7							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

Do not mark this page – make a copy.

12 BX Workout Journal

Level 11 – Elite – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total
Date _____	#11	5	5	5	5	5	0	25
	#10	5	5	5	5	0	0	20
Day _____	#9	5	5	5	5	0	0	20
	#8	5	5	5	5	0	0	20
Minutes per set – 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		85

		Exercise		Reps				Total
Date _____	#11							
	#10							
Day _____	#9							
	#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#11							
	#10							
Day _____	#9							
	#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#11							
	#10							
Day _____	#9							
	#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#11							
	#10							
Day _____	#9							
	#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

		Exercise		Reps				Total
Date _____	#11							
	#10							
Day _____	#9							
	#8							
Minutes per set – 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>						Work Out Total		

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12 BX Workout Journal

Level 12 – Elite – Push ups & Dips (Tuesday & Friday)

		Exercise		Reps				Total
Date _____	#12	5	5	5	5	5	0	25
	#11	5	5	5	5	0	0	20
Day _____	#10	5	5	5	5	0	0	20
	#9	5	5	5	5	0	0	20
Minutes per set – 1		<input checked="" type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			85

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

		Exercise		Reps				Total
Date _____	#12							
	#11							
Day _____	#10							
	#9							
Minutes per set – 1		<input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	Work Out Total			

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