

Burst Your Thirst Tracking Chart



	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Total
How many ounces of water did you drink today?								
Did you drink at least one glass (8 oz) of low-fat or fat-free milk today?								
Did you drink at least one glass (8 oz) of 100% fruit juice today?								
How many sports drinks did you consume today?								
How many ounces of caffeinated beverages did you consume today?								
How many servings (8 oz) of other beverages did you drink today?								
How many minutes of intentional physical activity did you complete?								

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