



YOUR MEASUREMENT GUIDE

Before Measurements

Date / /

Neck: _____

Chest: _____

Waist: _____

Hips: _____

Thigh: R _____

Calf: R _____

Upper Arm: _____

Body Weight (in lbs.): _____

Body Fat %: _____

After Measurements

Date / /

Neck: _____

Chest: _____

Waist: _____

Hips: _____

Thigh: _____

Calf: _____

Upper Arm: _____

Body Weight (in lbs.): _____

Body Fat %: _____

*Be sure to measure the same locations, using the same measuring tool.

Before Pic

After Pic