

For the next 10 weeks, I \_\_\_\_\_ will finish this walking program.

Signed by \_\_\_\_\_ on \_\_\_ - \_\_\_ - 2006

**Intermediate Program Checklist**

Week	# of Walks to complete	# of Walks done
1	4	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2	3-4	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3	4	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4	4-5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5	4-5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
6	4-5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
7	4-5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8	5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
9	5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
10	5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

<b>Intermediate Program</b>					
<b>Week</b>	<b>Walks Per week</b>	<b>Distance</b>	<b>Warm Up</b>	<b>Minutes Walked</b>	<b>Cool Down Time</b>
1	4	1.25	5 min	25	5 min
2	3-4	1.25	5 min	25	5 min
3	4	1.5	5 min	30	5 min
4	4-5	1.75	5 min	32	5 min
5	4-5	2	5 min	36	5 min
6	4-5	2.25	5 min	38	5 min
7	4-5	2.5	5 min	42	5 min
8	5	2.75	5 min	44	5 min
9	5	3	5 min	48	5 min
10	5	3.25	5 min	50	5 min

Again, listen to your body. if you feel any discomfort while following the program. slow down. Periodically check your heart rate to make sure you stay in the target zone.