

YOGA JOURNAL

YOUR WELLBEING JOURNEY



JUMPING THROUGH HOOPS

YOGA LOG

TODAY'S DATE

MUSIC

POSITION/S	TIME	DONE
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

GOAL/S FOR TODAY'S YOGA SESSION

YOGA PRACTICE JOURNAL

YOGA CLASS



TEACHER _____ LEVEL _____

YOGA STYLE _____ THEME/FOCUS _____

HOW I FELT BEFORE YOGA

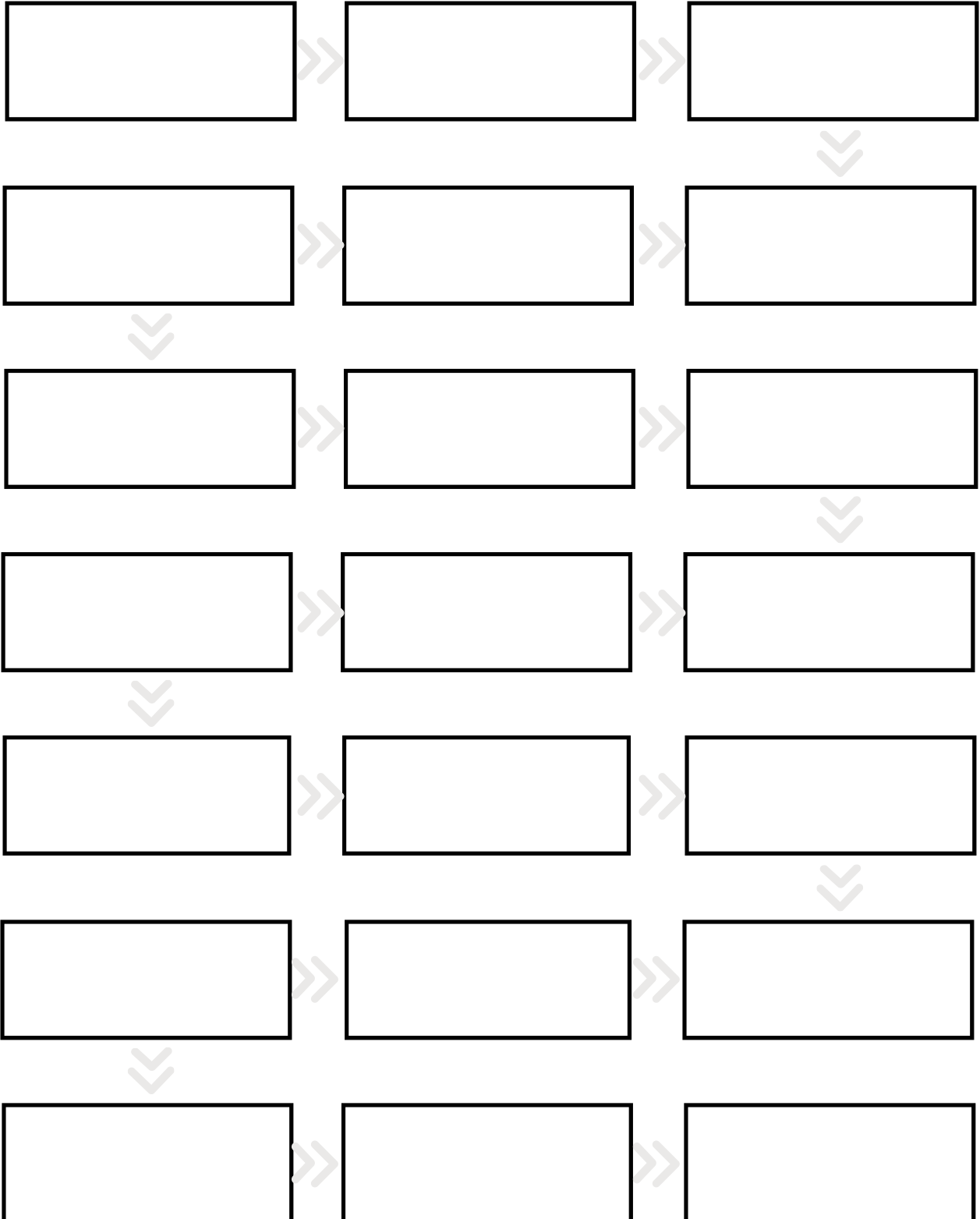
HOW I FELT AFTER YOGA

REFLECTIONS ON MANTRA / QUOTE / INTENTION

FAVOURITE POSES / SEQUENCE / NOTES / WAYS TO IMPROVE

YOGA SEQUENCE

START HERE



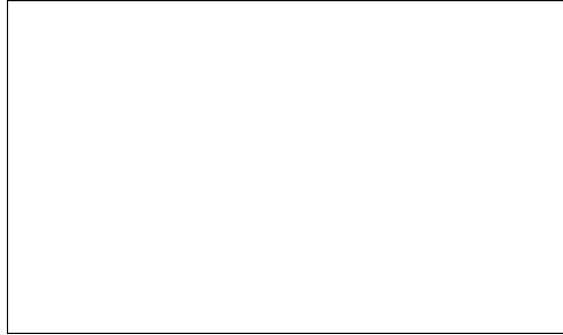
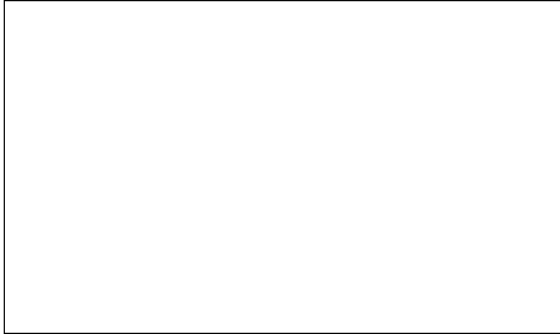
YOGA ROUTINE

WEEK:

MONDAY	TUESDAY	WEDNESDAY
THURSDAY	FRIDAY	SATURDAY
SUNDAY	NOTES	

YOGA POSES

DATE:



YOGA JOURNEY

YOGA POSES I CAN DO REALLY WELL ALREADY

01

02

03

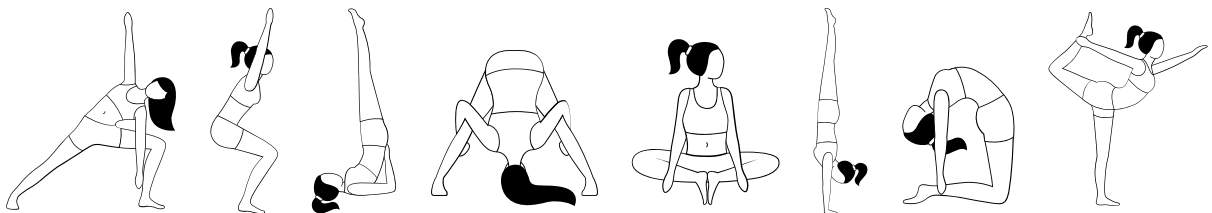
YOGA POSES I AM PRACTICING HARD TO PERFECT

01

02

03

YOGA POSE I CHALLENGE MYSELF



MEDITATION

MY MEDITATION GOAL

1

2

3

DATE

MY MEDITATION EXERCISE

TOTAL TIME



MEDITATION REFLECTION

M T W T F S S

DATE

What area did I focus on?	Did I hear or see anything?
What did I come to realize?	How did it make me feel?

M T W T F S S

DATE

What area did I focus on?	Did I hear or see anything?
What did I come to realize?	How did it make me feel?

MEDITATION TRACKER

DAY	MEDITATION ACTIVITY	DURATION
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
SUNDAY		
TOTAL MEDITATION TIME:		

DAILY MINDFULNESS

WHAT CAN I SEE?

HOW DO I FEEL?

WHAT DO I SMELL?

WHAT CAN I HEAR?

NOTES

DAILY GRATITUDE

Morning:

Date:

I am grateful for:

I'm looking forward to:

Daily Affirmations:

Evening:

Good things that happened today:

Things I can do to make tomorrow even better:

WEEKLY REFLECTION

DATE _____

How Am I Feeling About This Week?

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What Went Well?

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I Need To Let Go Of ...

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I am Proud Of ...

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.....

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I Need To Do More Of ...

.....

.....

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.....

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.....

.....

10 AFFIRMATIONS

1. I AM ...

2. I AM ...

3. I AM ...

4. I AM ...

5. I AM ...

6. I AM ...

7. I AM ...

8. I AM ...

9. I AM ...

10. I AM ...

HABIT TRACKER

MONTH _____

HABIT:

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

HABIT:

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
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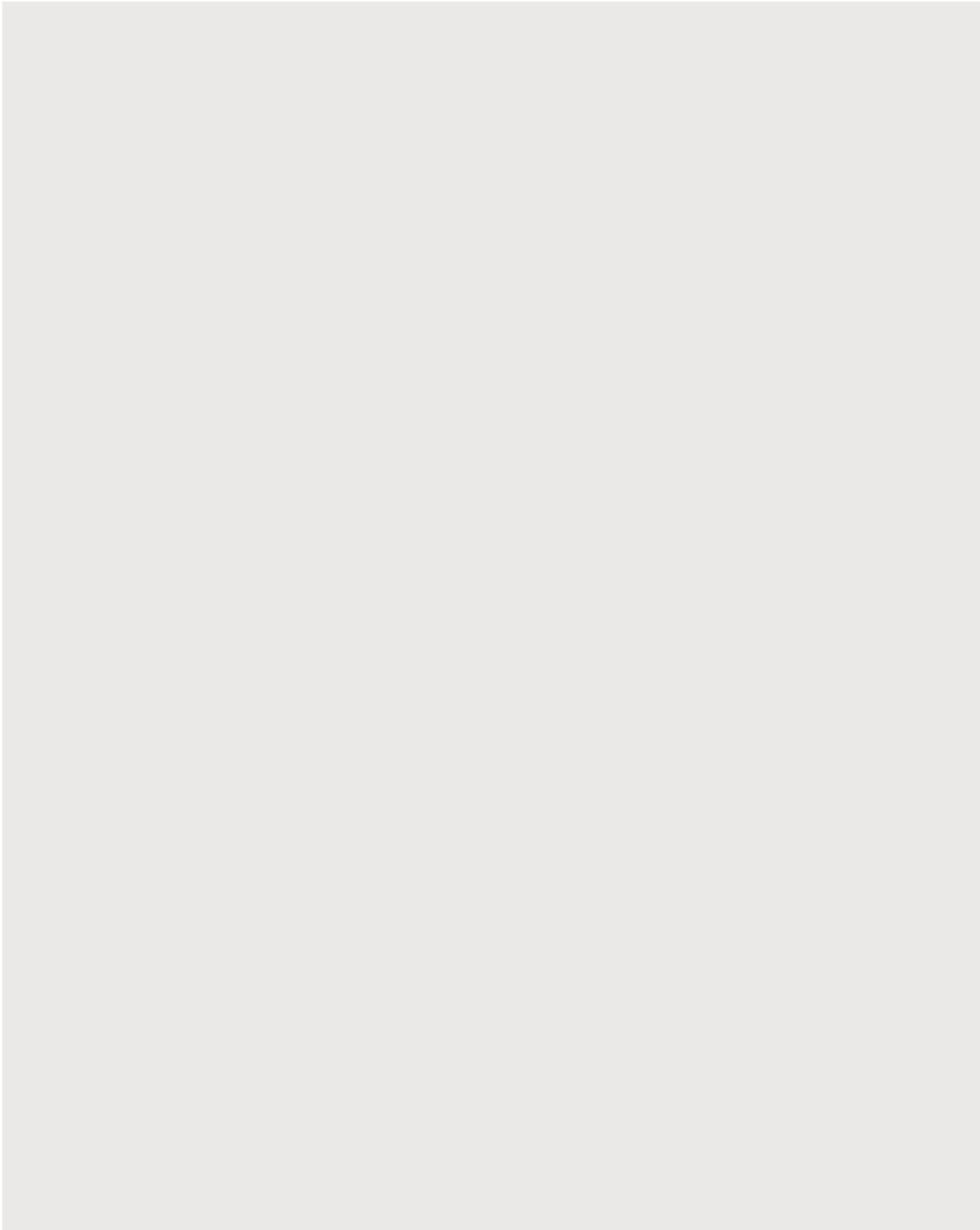
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NOTES

