

Athletic Performance Indicators

NAME _____

DATE _____

How well did you sleep last night?

TERRIBLE (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) AWESOME

Overall, how's your mood today?

TERRIBLE (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) AWESOME

Overall, how's your energy today?

EXHAUSTED (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) SUPERSTAR

Overall, how much do you feel like training today?

UGH, NO WAY (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) BRING IT ON!!

Overall, how's your physical health today?

VERY SICK OR INJURED (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) 100% HEALTHY & THRIVING

MORNING HEART RATE _____

MORNING TEMPERATURE _____

MORNING HEART RATE VARIABILITY (HRV) SCORE _____

BPM

°F / °C