

Extreme Lifestyle Makeover



Participant Measurement Log

NAME: _____
AGE: _____
HEIGHT: _____



Location of Measurement	Baseline		Final	
	DATE:		DATE:	+/-
Chest: Under arms (arms at sides)				
Waist: Smallest part				
Abdominals: 2 fingers below navel				
Hips: Feet together, widest part				
Right Thigh: Directly under the glute line				
Weight lbs:				
% Body Fat				
Total Inches:				