



SIMPLE AND GOOD
ENTERPRISE

W.O.O.D. CHALLENGE

WORKING ON OURSELVES DAILY

Daily activities that will lead to a lifestyle of good health and fitness.

Using a wholistic approach to: losing fat, preparing good tasting food/meal choices, addressing muscle/joint discomfort, performing functional movements and stimulating mental & emotional health.

LEVEL 1













MONTHLY ACTIVITY before the first 28 days are complete		HELPFUL TOOLS
TRY SOMETHING NEW Eat 1 new fruit you've never had before	<input checked="" type="checkbox"/> _____ <small>list fruit here</small>	Sal-smoo recipe book
REMOVE THE CLUTTER Clean 1 room from top to bottom	<input checked="" type="checkbox"/> _____ <small>list room here</small>	Wedge Kit
APPRECIATE YOUR ELDERS Take photo w/ 65+ yr old person	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Netjeru drink (bottled, mason jar or powder)
BRUSH IT OFF Dry skin brush <i>(video)</i>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Dry skin brush
WEEKLY ACTIVITY	WEEK 1	WEEK 2
DRINK WATER 24-32 oz within 3 hours after waking	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
EAT UPON WAKING Small snack (fruit, nuts, seeds) within 30 mins of waking	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
SAL-SMOO BEFORE NOON DRINK A NON-DAIRY SMOOTHIE EAT A MEATLESS SALAD	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
PREPARE SMOOTHIES <i>(video recipes)</i>	GREEN <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	RED <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
BREAKFAST Prescribed recipe <i>(photo/video)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
HUG Exchange good energy (20 full seconds)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LUNCH Prescribed recipe <i>(photo/video)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
WEDGE Your Body <i>(videos)</i>	CORE - PSOAS/ILLIAC (12 mins) <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	BACK (12 mins) <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
EXERCISES Active Fitness Training (AFT) <i>All exercises have a corresponding video to follow, please view on challenge page</i>	DEAD BUG (10 reps) with arm/hand extension	DEAD BUG (5 reps) w/ arm/hand extension
	PUSH-UP NEGATIVES (10 reps)	PUSH-UP NEGATIVES (5 reps)
	SCAPULAR RETRACTIONS (10 reps; 5-0-3 tempo)	SCAPULAR RETRACTIONS (5 reps; 5-0-3 tempo; video)
	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	CROSS KICK w/ ROLL & PUSH-UP (10 reps; video)
		BACK FLY'S (20 reps; w/ forehead in towel)
	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
DINNER Prescribed recipe <i>(photo/video)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
BREATHE Perform nightly (20 breaths)	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
SAVE Put 50 cents aside everyday	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

BOXES INDICATE NUMBER OF DAYS PER WEEK THIS ACTIVITY SHOULD BE DONE, CHECK ONCE COMPLETED

W.O.O.D. CHALLENGE

WORKING ON OURSELVES DAILY

LEVEL 1

WEEKLY ACTIVITY	WEEK 3	WEEK 4
 DRINK WATER 24-32 oz within 3 hours after waking	✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓
 EAT UPON WAKING Small snack (fruit, nuts, seeds) within 30 mins of waking	✓ ✓ ✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓
SAL-SMOO BEFORE NOON		
 DRINK A NON-DAIRY SMOOTHIE EAT A MEATLESS SALAD	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓
 PREPARE SMOOTHIES <i>(video recipes)</i>	BLUE ✓ ✓	ORANGE ✓ ✓
 BREAKFAST Prescribed recipe <i>(photo/video)</i>	✓	✓
 HUG Exchange good energy (20 full seconds)	✓	✓
 LUNCH Prescribed recipe <i>(photo/video)</i>	✓	✓
 WEDGE Your Body <i>(videos)</i>	GLUTES, IT BANDS & QUADS (18 mins) ✓ ✓ ✓	HAMSTRING, CALVES & FEET (18 mins) ✓ ✓ ✓
 EXERCISES Active Fitness Training (AFT) <i>All exercises have a corresponding video to follow, please view on challenge page</i>	DEAD BUG (5 reps) with arm/hand extension	DEAD BUG (5 reps) w/ arm/hand extension
	PUSH-UP NEGATIVES (5 reps)	PUSH-UP NEGATIVES (5 reps)
	SCAPULAR RETRACTIONS (5 reps; 5-0-3 tempo)	SCAPULAR RETRACTIONS (5 reps; 5-0-3 tempo)
	CROSS KICK w/ ROLL & PUSH-UP (5 reps - video)	CROSS KICK w/ ROLL & PUSH-UP (5 reps)
	BACK FLY'S (20 reps; w/ forehead in towel)	BACK FLY'S (10 reps; w/ forehead in towel)
	HEEL ELEVATED DEEP SQUAT (20 reps)	HIGH ELEVATED DEEP SQUAT (10 reps)
	PELVIC TILT/BRIDGE (20 reps)	PELVIC TILT/BRIDGE (10 reps)
		LUNGE/HIGH-KNEE THRUST (10 reps)
	✓ ✓ ✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓
 DINNER Prescribed recipe <i>(photo/video)</i>	✓	✓
 BREATHE Perform breathing exercises nightly (20 breaths)	✓ ✓ ✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓
 SAVE Put 50 cents aside everyday	✓ ✓ ✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓



For more information, and to sign up, visit us:

WOODChallenges.com

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