

Name: _____

Week Ending: _____

	FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
20 Push-ups							
20 Crunches							
10 Knee Bends							
10 Up/Downs							
10 Sit-Backs							
10 Stand-Ups							
20 Penetration Steps							
5 Brige to Back							

Parents, please initial the appropriate boxes when your wrestler completes the task. On the nights of practice, if your wrestler attends, then all boxes can be initials.