

Your Balance Exercise Record

Bringing Your Balance Information Together

Use this page to record your first and second rounds for each of the four balance exercises. Complete each exercise during a guided FIT4Life class and choose the movement option and support that fit you today.

1 st Round	Support Used or Changed	2 nd Round	What I Noticed Compared to 1 st Round
Left Single Leg Stand _____ out of 30 sec		Left Single Leg Stand _____ out of 30 sec	
Right Single Leg Stand _____ out of 30 sec		Right Single Leg Stand _____ out of 30 sec	
Tandem Stance — Left Foot Forward _____ out of 30 sec		Tandem Stance — Left Foot Forward _____ out of 30 sec	
Tandem Stance — Right Foot Forward _____ out of 30 sec		Tandem Stance — Right Foot Forward _____ out of 30 sec	
Left Lateral Hold _____ out of 30 sec		Left Lateral Hold _____ out of 30 sec	
Right Lateral Hold _____ out of 30 sec		Right Lateral Hold _____ out of 30 sec	
360-Degree Turn - Left _____ number of steps around		360-Degree Turn - Left _____ number of steps around	
360-Degree Turn-Right _____ number of steps around		360-Degree Turn-Right _____ number of steps around	

After recording and comparing both rounds, return to each Balance Exercise Page and complete Where I Will Begin. Choose a starting time, number of steps, and support that feel appropriate for you.

Single-Leg Stand

Two Rounds and Where I Will Begin

Complete this exercise during the guided FIT4Life class. Choose the standing option and support that fit you today

Safety Reminder

Keep a sturdy chair or other secure support within reach. Use support whenever you need it. Stop if the exercise causes pain or does not feel safe.

Record both rounds on My Balance Exercise Record. After the second round, return to this page and complete Where I Will Begin.

1 st Round	2 nd Round
☐ No hand support ☐ Light touch ☐ One hand ☐ Both hands ☐ Another support:	☐ No hand support ☐ Light touch ☐ One hand ☐ Both hands ☐ Another support:
Overall, Today's Class Felt ☐ Too much today ☐ Very challenging ☐ Challenging but manageable ☐ I may be ready for more	Overall, Today's Class Felt ☐ Too much today ☐ Very challenging ☐ Challenging but manageable ☐ I may be ready for more

Pause and Reset (After 1st Round)

Before continuing:

- ☐ I felt ready to continue
- ☐ I needed more time
- ☐ Another round did not feel appropriate today

What I Noticed

Compared with my first round, this round felt:

- ☐ Felt steadier
- ☐ Felt about the same
- ☐ Felt more challenging
- ☐ Needed more support
- ☐ I stopped or changed the exercise

Where I Will Begin

My start time: Right ____ sec. Left: ____ sec.

Support I will use: _____

This is where I will begin—not a level I must stay at or repeat every time.

Tandem Stance

Two Rounds and Where I Will Begin

Complete this exercise during the guided FIT4Life class. Choose the standing option and support that fit you today

Safety Reminder

Keep a sturdy chair or other secure support within reach. Use support whenever you need it. Stop if the exercise causes pain or does not feel safe.

Record both rounds on My Balance Exercise Record. After the second round, return to this page and complete Where I Will Begin.

1 st Round	2 nd Round
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My start time:

Right foot forward: ____ sec. Left foot forward: ____ sec.

Support I will use: _____

This is where I will begin—not a level I must stay at or repeat every time.

Right and Left Lateral Hold

Two Rounds and Where I Will Begin

Complete this exercise during the guided FIT4Life class. Choose the standing option and support that fit you today

Safety Reminder

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Where I Will Begin

My start time: Right ____ sec. Left: ____ sec.

Support I will use: _____

This is where I will begin—not a level I must stay at or repeat every time.

360-Degree Turn

Two Rounds and Where I Will Begin

Complete this exercise during the guided FIT4Life class. Choose the standing option and support that fit you today

Safety Reminder

Keep a sturdy chair or other secure support within reach. Make sure the area around you is clear and turn at a controlled pace. Stop if you feel pain, dizziness, or unsafe.

Record both rounds on My Balance Exercise Record. After the second round, return to this page and complete Where I Will Begin.

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Where I Will Begin

My starting number of steps: Turning right: _____ Turning left: _____

Support I will use: _____

This is where I will begin—not a level I must stay at or repeat every time.