

## Body Measurement Record Sheet

<b>Student's Name</b>		
<b>Student's Age</b>	<b>Check Gender:</b> <b>Male</b> <b>Female</b>	
<b>Measurement Date #1</b>	<b>Measurement Date #2</b>	
<b>Measurement</b>	<b>#1</b>	<b>#2</b>
<b>Height</b> In feet and inches		
<b>Weight</b> In pounds		
<b>Chest</b> In inches		
<b>Biceps</b> In inches		
<b>Waist</b> In inches		
<b>Hips</b> In inches		
<b>Thigh</b> In inches		