**24-hour Food Diary**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Time** | **Food and/or Drink** | | **Calorie Input** (these columns to be completed in class) | |
| **What kind** | **How Much** | **Per Item** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total Calorie Input** | | | |  |
|  |