

# Exercise Journal Sheet

**Exercise Name:** \_\_\_\_\_

**Practice Duration:** \_\_\_\_\_

**# of Repeats:** \_\_\_\_\_

**After completing the exercise, how do you feel?**

**Overall, what stood out to you about this particular exercise? It can be anything at all, not just new thoughts / visual information.**

**In retrospect of the exercise you've just completed, what specific moments stand out to you? Which moment(s) might you feel is outside of your norm?**

