

# 2010

## PERSONAL FITNESS PROGRAM OVERVIEW & WORKBOOK



YMCA

MERIT BADGE UNIVERSITY

OVERLAND TRAILS COUNCIL

7/31/2010



## TABLE OF CONTENTS

PROGRAM OVERVIEW

MERIT BADGE REQUIREMENTS

*(PRE-REQUISITE REQUIREMENTS IN **BOLD RED UNDERLINED ITALICS**)*

WORKBOOK PART ONE

*(COMPLETE BEFORE ATTENDING MBU)*

WORKBOOK PART TWO

*(WILL BE COMPLETED DURING CLASS)*

ADDITIONAL RESOURCES

APPLICATION for MERIT BADGE

*(MUST HAVE UNIT LEADER SIGNATURE PRIOR TO CLASS)*



FEBRUARY 2010

Information in this booklet was accurate at the time of publishing.  
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Program Overview & Workbook was reviewed by  
MBU Staff/Committee.

## PERSONAL FITNESS PROGRAM OVERVIEW

**COUNSELOR:** tba

C/O: Overland Trails Council  
PO Box 1361  
Grand Island, NE 68802-1361

**LOCATION:** YMCA  
221 East South Front Street  
Grand Island, NE 68801

**TRANSPORTATION:** Transportation is provided

**ADDITIONAL COSTS:** None

**CLASS SIZE:** 10

**BRING TO CLASS:** Personal Fitness merit badge pamphlet.  
Personal Fitness merit badge workbook, part one & part two  
Signed "Application for Merit Badge", found at the end of the merit badge workbook. (This will be your only record of work completed on this merit badge.) If your Council requires the official "blue card", you must bring one with you to class.

**PRE-REQUISITES:** Complete Part One of the workbook before class (requirements 1, 6, 7, 8, & 9).  
Complete information on the "Application for Merit Badge" including Scoutmasters signature.

**CURRICULUM:** Requirements 2, 3, 4, & 5 will be completed during class (part two of the workbook). Pre-requisites will also be reviewed during class.



## PERSONAL FITNESS

Boy Scouts Requirements 2010, updates

PRE-REQUISITE REQUIREMENTS ARE PRINTED IN **ITALICS & RED** & MUST BE COMPLETED BEFORE CLASS.

If meeting any of the requirements for this merit badge is against the Scout's religious convictions, the requirement does not have to be done if the Scout's parents and the proper religious advisers state in writing that to do so would be against religious convictions. The Scout's parents must also accept full responsibility for anything that might happen because of this exemption.

1. **Do the following:**

a) **Before completing requirements 2 through 9, have your health-care practitioner give you a physical examination, using the Scout medical examination form. Describe the examination. Tell what questions you were asked about your health. Tell what health or medical recommendations were made and report what you have done in response to the recommendations. Explain the following:**

- 1) **Why physical exams are important**
- 2) **Why preventive habits (such as exercising regularly) are important in maintaining good health, and how the use of tobacco products, alcohol, and other harmful substances can negatively affect your personal fitness**
- 3) **Diseases that can be prevented and how**
- 4) **The seven warning signs of cancer**
- 5) **The youth risk factors that affect cardiovascular fitness in adulthood**

b) **Have a dental examination. Get a statement saying that your teeth have been checked and cared for. Tell how to care for your teeth.**

2. Explain to your merit badge counselor verbally or in writing what personal fitness means to you, including
  - a) Components of personal fitness.
  - b) Reasons for being fit in all components.
  - c) What it means to be mentally healthy.
  - d) What it means to be physically healthy and fit.
  - e) What it means to be socially healthy. Discuss your activity in the areas of healthy social fitness.
  - f) What you can do to prevent social, emotional, or mental problems.
3. With your counselor, answer and discuss the following questions:
  - a) Are you free from all curable diseases? Are you living in such a way that your risk of preventable diseases is minimized?
  - b) Are you immunized and vaccinated according to the advice of your health-care provider?
  - c) Do you understand the meaning of a nutritious diet and know why it is important for you? Does your diet include foods from all food groups?

- d) Are your body weight and composition what you would like them to be, and do you know how to modify them safely through exercise, diet, and behavior modification?
  - e) Do you carry out daily activities without noticeable effort? Do you have extra energy for other activities?
  - f) Are you free from habits relating to poor nutrition and the use of alcohol, tobacco, drugs, and other practices that could be harmful to your health?
  - g) Do you participate in a regular exercise program or recreational activities?
  - h) Do you sleep well at night and wake up feeling refreshed and energized for the new day?
  - i) Are you actively involved in the religious organization of your choice, and do you participate in their youth activities?
  - j) Do you spend quality time with your family and friends in social and recreational activities?
  - k) Do you support family activities and efforts to maintain a good home life?
4. Explain the following about physical fitness:
- a) The components of physical fitness
  - b) Your weakest and strongest component of physical fitness
  - c) The need to have a balance in all four components of physical fitness
  - d) How the components of personal fitness relate to the Scout Law and Scout Oath
5. Explain the following about nutrition:
- a) The importance of good nutrition
  - b) What good nutrition means to you
  - c) How good nutrition is related to the other components of personal fitness
  - d) The three components of a sound weight (fat) control program

**6. Before doing requirements 7 and 8, complete the aerobic fitness, flexibility, muscular strength and body composition tests as described in the Personal Fitness merit badge pamphlet. Record your results and identify those areas where you feel you need to improve.**

### **Aerobic Fitness Test**

**Record your performance on ONE of the following tests:**

- a) **Run/walk as far as you can in nine minutes.**
- b) **Run/walk 1 mile as fast as you can.**

### **Flexibility Test**

**Using a sit-and-reach box constructed according to specifications in the Personal Fitness merit badge pamphlet, make four repetitions and record the fourth reach. This last reach must be held steady for 15 seconds to qualify. (Remember to keep your knees down.)**

### **Strength Tests**

**Record your performance on all three tests.**

- a) **Sit-Ups. Record the number of sit-ups done correctly in 60 seconds. The sit-ups must be done in the form explained and illustrated in the Personal Fitness merit badge pamphlet.**
- b) **Pull-Ups. Record the total number of pull-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the Personal Fitness merit badge pamphlet.**

- c) Push-Ups. Record the total number of push-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the Personal Fitness merit badge pamphlet.

### Body Composition Test

Have your parent, counselor, or other adult take and record the following measurements:

- a) Circumference of the right upper arm, midway between the shoulder and the elbow, with the arm hanging naturally and not flexed.
- b) Shoulders, with arms hanging by placing the tape measure 2 inches below the top of the shoulders around the arms, chest, and back after breath expiration.
- c) Chest, by placing the tape under the arms and around the chest and back at the nipple line after breath expiration.
- d) Abdomen circumference at the navel level (relaxed).
- e) Circumference of the right thigh, midway between the hip and knee, and not flexed.

If possible, have the same person take the measurements whenever they are recorded.

7. Outline a comprehensive 12-week physical fitness program using the results of your fitness test. Be sure your program incorporates the endurance, intensity, and warm-up guidelines discussed in the Personal Fitness merit badge pamphlet. Before beginning your exercises, have the program approved by your counselor and parents.
8. Complete the physical fitness program you outlined in requirement 7. Keep a log of your fitness program activity (how long you exercised; how far you ran, swam, or biked; how many exercise repetitions you completed; your exercise heart rate; etc.). Repeat the aerobic fitness, muscular strength, and flexibility tests every two weeks and record your results. After the 12<sup>th</sup> week, repeat all four tests, record your results, and show improvement in each one. Compare and analyze your preprogram and postprogram body composition measurements. Discuss the meaning and benefit of your experience, and describe your long-term plans regarding your personal fitness.
9. Find out about three career opportunities in personal fitness. Pick one and find out the education, training, and experience required for this profession. Discuss what you learned with your counselor, and explain why this profession might interest you.

# PERSONAL FITNESS WORKBOOK

## PART ONE, PRE-REQUISITIES



Name \_\_\_\_\_  
 Unit # \_\_\_\_\_ District \_\_\_\_\_  
 Council \_\_\_\_\_

**Part One of the workbook must be completed before class.**

**Bring the entire workbook (part one and part two) with you to class.**

**Also bring the "Application for Merit Badge" signed by your scoutmaster (included at the end of the workbook).**

If meeting any of the requirements for this merit badge is against the Scout's religious convictions, the requirement does not have to be done if the Scout's parents and the proper religious advisers state in writing that to do so would be against religious convictions. The Scout's parents must also accept full responsibility for anything that might happen because of this exemption.

- 1. Do the following:
  - a) Before completing requirements 2 through 9, have your health-care practitioner give you a physical examination, using the Scout medical examination form. Describe the examination. Tell what questions you were asked about your health. Tell what health or medical recommendations were made and report what you have done in response to the recommendations. Explain the following:

*Physical examination completed:*

	<i>Initial:</i>	<i>date:</i>
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*Describe the examination:*


*What questions were you asked about your health:*


*What health or medical recommendations were made:*


*Report what you have done in response to the recommendations:*


Name \_\_\_\_\_

1a) continued  
 1) Why physical exams are important

*Why physical exams are important:*


2) Why preventive habits (such as exercising regularly) are important in maintaining good health, and how the use of tobacco products, alcohol, and other harmful substances can negatively affect your personal fitness

*Why preventive habits are important:*


*Use of tobacco products, alcohol, and other harmful substances can negatively affect your fitness:*


3) Diseases that can be prevented and how

*Diseases that can be prevented and how:*


4) The seven warning signs of cancer

*The seven warning signs of cancer:*

1
2
3
4
5
6
7

Name \_\_\_\_\_

1a) continued	
<input type="checkbox"/> 5) The youth risk factors that affect cardiovascular fitness in adulthood	
<i>Youth risk factors that affect cardiovascular fitness in adulthood:</i>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
<input type="checkbox"/> b) Have a dental examination. Get a statement saying that your teeth have been checked and cared for. Tell how to care for your teeth.	
<i>Dental examination completed:</i>	
<input type="text"/>	<i>Initial:                      date:</i>
<i>Attach the statement saying that your teeth have been checked and cared for to this workbook.</i>	
<i>Tell how to care for your teeth:</i>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	

<input type="checkbox"/> 6. Before doing requirements 7 and 8, complete the aerobic fitness, flexibility, muscular strength and body composition tests as described in the Personal Fitness merit badge pamphlet. Record your results and identify those areas where you feel you need to improve.	
<b>Aerobic Fitness Test</b>	
Record your performance on ONE of the following tests:	
<input type="checkbox"/> a) Run/walk as far as you can in nine minutes.	
<input type="text"/>	<input type="text"/>
<i>Date:</i>	<i>Distance:</i>
<input type="checkbox"/> b) Run/walk 1 mile as fast as you can.	
<input type="text"/>	<input type="text"/>
<i>Date:</i>	<i>Time:</i>

Name \_\_\_\_\_

6. continued

**Flexibility Test**

- Using a sit-and-reach box constructed according to specifications in the Personal Fitness merit badge pamphlet, make four repetitions and record the fourth reach. This last reach must be held steady for 15 seconds to qualify. (Remember to keep your knees down.)

<i>Date:</i>	<i>Completed:</i>
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**Strength Tests**

Record your performance on all three tests.

- a) Sit-Ups. Record the number of sit-ups done correctly in 60 seconds. The sit-ups must be done in the form explained and illustrated in the Personal Fitness merit badge pamphlet.

<i>Date:</i>	<i>Number completed:</i>
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- b) Pull-Ups. Record the total number of pull-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the Personal Fitness merit badge pamphlet.

<i>Date:</i>	<i>Number completed:</i>
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- c) Push-Ups. Record the total number of push-ups completed correctly in 60 seconds. Be consistent with the procedures presented in the Personal Fitness merit badge pamphlet.

<i>Date:</i>	<i>Number completed:</i>
--------------	--------------------------

Name \_\_\_\_\_

6. continued

**Body Composition Test**

Have your parent, counselor, or other adult take and record the following measurements:

- a) Circumference of the right upper arm, midway between the shoulder and the elbow, with the arm hanging naturally and not flexed.

<i>Date:</i>	<i>Measurement:</i>
--------------	---------------------

- b) Shoulders, with arms hanging by placing the tape measure 2 inches below the top of the shoulders around the arms, chest, and back after breath expiration.

<i>Date:</i>	<i>Measurement:</i>
--------------	---------------------

- c) Chest, by placing the tape under the arms and around the chest and back at the nipple line after breath expiration.

<i>Date:</i>	<i>Measurement:</i>
--------------	---------------------

- d) Abdomen circumference at the navel level (relaxed).

<i>Date:</i>	<i>Measurement:</i>
--------------	---------------------

- e) Circumference of the right thigh, midway between the hip and knee, and not flexed.

<i>Date:</i>	<i>Measurement:</i>
--------------	---------------------

If possible, have the same person take the measurements whenever they are recorded.

*A copy of "Fitness Measurements" can be found at the end of this workbook.*

- 7. Outline a comprehensive 12-week physical fitness program using the results of your fitness test. Be sure your program incorporates the endurance, intensity, and warm-up guidelines discussed in the Personal Fitness merit badge pamphlet. Before beginning your exercises, have the program approved by your counselor and parents.

*To help you complete this requirement a "Physical Fitness Program Outline" can be found at the end of this workbook.*

Name \_\_\_\_\_

- 8. Complete the physical fitness program you outlined in requirement 7. Keep a log of your fitness program activity (how long you exercised; how far you ran, swam, or biked; how many exercise repetitions you completed; your exercise heart rate; etc.). Repeat the aerobic fitness, muscular strength, and flexibility tests every two weeks and record your results. After the 12<sup>th</sup> week, repeat all four tests, record your results, and show improvement in each one. Compare and analyze your preprogram and postprogram body composition measurements. Discuss the meaning and benefit of your experience, and describe your long-term plans regarding your personal fitness.

*To help you complete this requirement an "Exercise Log" & "Exercise Journal" can be found at the end of this workbook.*

- 9. Find out about three career opportunities in personal fitness. Pick one and find out the education, training, and experience required for this profession. Discuss what you learned with your counselor, and explain why this profession might interest you.

*Career opportunities in aviation:*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

*Pick one career:*

- Career:* \_\_\_\_\_
- Education:* \_\_\_\_\_
- Training:* \_\_\_\_\_
- Experience:* \_\_\_\_\_

*Why this profession interest's you:*




## PERSONAL FITNESS WORKBOOK PART TWO, CLASS CURRICULUM

Name \_\_\_\_\_  
Unit # \_\_\_\_\_ District \_\_\_\_\_  
Council \_\_\_\_\_

**Part Two of the workbook will be completed during class.**

If meeting any of the requirements for this merit badge is against the Scout's religious convictions, the requirement does not have to be done if the Scout's parents and the proper religious advisers state in writing that to do so would be against religious convictions. The Scout's parents must also accept full responsibility for anything that might happen because of this exemption.

- 2. Explain to your merit badge counselor verbally or in writing what personal fitness means to you, including
  - a) Components of personal fitness.

*Components of personal fitness:*


- b) Reasons for being fit in all components.

*Fit in all components:*


- c) What it means to be mentally healthy.

*Mentally healthy:*


- d) What it means to be physically healthy and fit.

*Physically healthy and fit:*


Name \_\_\_\_\_

2. continued

- e) What it means to be socially healthy. Discuss your activity in the areas of healthy social fitness.

*Socially healthy:*


*Activity in the areas of healthy social fitness:*


- f) What you can do to prevent social, emotional, or mental problems.

*What you can do to prevent social emotional, or mental problems:*


- 3. With your counselor, answer and discuss the following questions:

- a) Are you free from all curable diseases? Are you living in such a way that your risk of preventable diseases is minimized?

*Free from all curable diseases:*


*Living in such a way that risk of preventable diseases is minimized:*


Name \_\_\_\_\_

3. continued

- b) Are you immunized and vaccinated according to the advice of your health-care provider?

*Immunized and vaccinated:*


- c) Do you understand the meaning of a nutritious diet and know why it is important for you?  
Does your diet include foods from all food groups?

*Nutritious diet and why it is important:*


*Does your diet include foods from all food groups:*


- d) Are your body weight and composition what you would like them to be, and do you know how to modify them safely through exercise, diet, and behavior modification?

*Body weight and composition:*


*How to modify them safely:*


- e) Do you carry out daily activities without noticeable effort? Do you have extra energy for other activities?

*Daily activities:*


*Extra energy for other activities:*


Name \_\_\_\_\_

3. continued

- f) Are you free from habits relating to poor nutrition and the use of alcohol, tobacco, drugs, and other practices that could be harmful to your health?

*Free from habits relating to poor nutrition:*


*and use of alcohol, tobacco, drugs, and other practices:*


- g) Do you participate in a regular exercise program or recreational activities?

*Regular exercise program or recreational activities:*


- h) Do you sleep well at night and wake up feeling refreshed and energized for the new day?

*Sleep well at night:*


- i) Are you actively involved in the religious organization of your choice, and do you participate in their youth activities?

*Actively involved in the religious organization of your choice:*


*Participate in their youth activities:*


Name \_\_\_\_\_

3. continued

- j) Do you spend quality time with your family and friends in social and recreational activities?

*Quality time with your family and friends in social and recreational activities:*


- k) Do you support family activities and efforts to maintain a good home life?

*Support family activities and efforts to maintain a good home life:*


- 4. Explain the following about physical fitness:

- a) The components of physical fitness

*Components of physical fitness:*


- b) Your weakest and strongest component of physical fitness

*Weakest and strongest component of physical fitness:*


- c) The need to have a balance in all four components of physical fitness

*Need to have a balance in all four components:*


Name \_\_\_\_\_

4. continued

- d) How the components of personal fitness relate to the Scout Law and Scout Oath

*How the components of personal fitness relate to the Scout Law and Oath:*


- 5. Explain the following about nutrition:

- a) The importance of good nutrition

*Importance of good nutrition:*


- b) What good nutrition means to you

*What good nutrition means to you:*


- c) How good nutrition is related to the other components of personal fitness

*How it is related to other components of personal fitness:*


- d) The three components of a sound weight (fat) control program

*Three components of a sound weight control program:*


## ORGANIZATIONS and WEB SITES

*(Whenever you go online, be sure you have your parent's permission first.)*

Amateur-Sports.com

<http://www.amateur-sports.com>

American Dietetic Association

<http://www.eatright.org>

Fit Family, Fit Kids

<http://www.fitfamilyfitkids.com>

Fitness for Kids

<http://www.fitnessforkids.org>

International Food Information Council Foundation

<http://ific.org>

KidsHealth

<http://www.kidshealth.org>

National Athletic Trainer's Association

<http://www.nata.org>

**PERSONAL FITNESS WORKBOOK**

Notes



**APPLICATION FOR MERIT BADGE**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Is a registered \_\_\_\_\_ Boy Scout,  
 \_\_\_\_\_ Varsity Scout,  
 \_\_\_\_\_ Venturer,

of \_\_\_\_\_ No. \_\_\_\_\_  
Troop, team, crew, ship

District: \_\_\_\_\_

Council: \_\_\_\_\_

**MERIT BADGE UNIVERISTY**

Merit Badge: **Personal Fitness**

Counselor: \_\_\_\_\_

Address: Overland Trails Council

PO Box 1361

2808 O'Flannagan

Grand Island, NE 68802-1361

Phone: 308-382-3717

email: mbuotc@yahoo.com

*and is qualified to begin working for this merit badge and has completed the following pre-requisite requirements:*

**SECTION A PRE-REQUISITE REQUIREMENTS**

Requirement No. and letter	Date of Approval	Counselor Initial	Requirement No. and letter	Date of Approval	Counselor Initial
1			9		
6					
7					
8					

*The applicant has personally appeared before me and demonstrated to my satisfaction that he has met all pre-requisites requirements for the above stated merit badge and is ready to attend his assigned MBU class.*

Signature of Unit Leader \_\_\_\_\_ Date \_\_\_\_\_

**SECTION B APPLICANTS RECORD**

Requirement No. and letter	Date of Approval	Counselor Initial	Requirement No. and letter	Date of Approval	Counselor Initial
2					
3					
4					
5					

The applicant has personally appeared before me and demonstrated to my satisfaction that he has completed all requirements in **SECTION B** above for the

Merit Badge: **Personal Fitness**

Name of Counselor: \_\_\_\_\_

Signature of Counselor \_\_\_\_\_ Date \_\_\_\_\_

### SCOUT INSTRUCTIONS

- Complete your name, address, city, unit type & number, district, & council on the Application for Merit Badge.
- Your unit leader must sign the Application for Merit Badge before attending class.
- All other information is already printed on the Application for Merit Badge; please make sure all information is correct.
- The merit badge counselor is registered & approved for this merit badge and is on the MBU Counselor's List.
- Read the merit badge pamphlet.
- Attend the merit badge class.
- Always meet with your counselor along with a buddy (a Scout, friend, or parent)
- Have your merit badge worksheet with you when you attend class.
- **If the merit badge pre-requisites are not completed before class, you will not be able to complete the merit badge during this weekend event, you will have to follow up with your Unit's Advancement Chair when you return home**
- **PLEASE BE AWARE THAT SOME COUNSELORS WILL NOT ALLOW YOU TO ATTEND THEIR CLASS WITHOUT PRE-REQUISITES COMPLETED—CLASS CURRICULUM IS DEPENDENT ON PRE-REQUISITE WORK BEING COMPLETED!**

### COUNSELOR INSTRUCTIONS

- Never meet alone with a Scout.
- Verify all information & merit badge name on Application for Merit Badge is correct.
- Sign your name on the line at the bottom of **"SECTION B APPLICANTS RECORD"**.

## Physical Fitness Program Outline

### Warm-Up Routine


### Aerobic Routine


### Strength Routine


### Flexibility routine


### Cool-Down


## Fitness Measurements

Aerobic Fitness	Start	2 <sup>nd</sup> Week	4 <sup>th</sup> Week	6 <sup>th</sup> Week	8 <sup>th</sup> Week	10 <sup>th</sup> Week	12 <sup>th</sup> Week	Goal
9-Minute Run/Walk (Yards completed)								
1-Mile Run/Walk (In minutes and seconds)								

You may choose either the nine-minute run/walk for distance OR the 1-mile run/walk for time. You may also do both for extra experience and benefit.

Strength	Start	2 <sup>nd</sup> Week	4 <sup>th</sup> Week	6 <sup>th</sup> Week	8 <sup>th</sup> Week	10 <sup>th</sup> Week	12 <sup>th</sup> Week	Goal
Sit-Ups								
Push-Ups								
Pull-Ups								

You must do the sit-ups exercise and one other (either push-ups or pull-ups). You may also do all three for extra experience and benefit. (Measurements should be in numbers and repetitions.)

Flexibility	Start	2 <sup>nd</sup> Week	4 <sup>th</sup> Week	6 <sup>th</sup> Week	8 <sup>th</sup> Week	10 <sup>th</sup> Week	12 <sup>th</sup> Week	Goal
Reach (In centimeters)								

Body Composition	Start	2 <sup>nd</sup> Week	4 <sup>th</sup> Week	6 <sup>th</sup> Week	8 <sup>th</sup> Week	10 <sup>th</sup> Week	12 <sup>th</sup> Week	Goal
Right Arm Circumference								
Shoulder Circumference								
Chest Circumference								
Abdomen Circumference								
Right Thigh Circumference								

Remember that each set of measurements should be taken by the same adult, if possible. Measurements should be in inches.



## Exercise Journal

Name:

Week:

Date	Description of Activity