


















# Vector Health Resistance Training Beginner Progra #1

07 4927 8190 [vectorhealth.accelerware.com](http://vectorhealth.accelerware.com)

This program is for a beginner, wanting to learn more about how to improve their technique, and improve their general strength. If this program is too hard or easy for you, then you should consult a suitably qualified health professional about helping you design a program that is suitable for you. Vector Health provides face to face and online coaching as part of our services and we are happy to help you. Our number is 07 4927 8190 or email [reception@vectorhealth.com.au](mailto:reception@vectorhealth.com.au)

## Day 1

Dynamic Warm Up		Week 1	Week 2	Week 3	Week 4
Training Date:					
Body Weight:		kg	kg	kg	kg
1	Walk	☐ 5min	☐ 5min	☐ 5min	☐ 5min

Strength Training		Week 1	Week 2	Week 3	Week 4
Training Date:					
Body Weight:		kg	kg	kg	kg
1	 <b>Body Weight - Wide Squat</b>  201  30s	10 ☐ 10 ☐ 10 ☐	12 ☐ 12 ☐ 12 ☐	15 ☐ 15 ☐ 15 ☐	20 ☐ 20 ☐ 20 ☐
2	 <b>Push Up floor</b>  301  60s	6 ☐ 6 ☐	7 ☐ 7 ☐ 7 ☐	8 ☐ 8 ☐ 8 ☐	10 ☐ 10 ☐ 10 ☐
3	 <b>Body Weight - Split Squat</b>  301  60s	6 ☐ 6 ☐	8 ☐ 8 ☐ 8 ☐	8 ☐ 8 ☐ 8 ☐	10 ☐ 10 ☐ 10 ☐
4	 <b>Floor - Bridge Back</b>  201  30s	10 ☐ 10 ☐ 10 ☐	10 ☐ 10 ☐ 10 ☐	12 ☐ 12 ☐ 12 ☐	12 ☐ 12 ☐ 12 ☐
5	 <b>Body Weight - Two Foot Calf Raises (Floor)</b>	10 ☐ 10 ☐	10 ☐ 10 ☐ 10 ☐	12 ☐ 12 ☐ 12 ☐	12 ☐ 12 ☐ 12 ☐
6	<b>Floor - Front Bridge (4 point - Forearms)</b>  Hold  30s	☐ x 15s ☐	☐ x 20s ☐	☐ x 25s ☐	☐ x 30s ☐

		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------------------------------------------------------------------	--	--------------------------	--------------------------	--------------------------	--------------------------

Flexibility		Week 1	Week 2	Week 3	Week 4
Training Date:					
Body Weight:		kg	kg	kg	kg
1	 <b>Static Stretching - Pec Major</b>	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side
2	 <b>Static Stretching - Pec Minor</b>	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side
3	 <b>Static Stretching - Triceps with Lats</b>	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side
4	 <b>Static Stretching - Lying Hamstring</b>	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side
5	 <b>Static Stretch - Seated Glut Stretch</b>	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side
6	 <b>Static Stretching - Kneeling Hip Flexor</b>	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side
7	 <b>Static Stretching - Leaning Gastrocnemius</b>	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side	<input type="checkbox"/> 20s ea. side
8	 <b>Static Stretching - Rectus Femoris</b>	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side	<input type="checkbox"/> 30s ea. side