

MEAL PLAN FOR _____, 20__

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
B						
L						
D						
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SNACK ITEMS:

NOTES:

MONTHLY MEAL PLANNING FRAMEWORK

EATING GOALS FOR THIS MONTH

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____

TIME AVAILABLE FOR FOOD PREP

MONDAY	_____
TUESDAY	_____
WEDNESDAY	_____
THURSDAY	_____
FRIDAY	_____
SATURDAY	_____
SUNDAY	_____

FAVOURITE SEASONAL FOODS THIS MONTH

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SPECIAL OCCASIONS

DATE	EVENT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

FLYER SPECIALS THIS MONTH

_____	_____
_____	_____
_____	_____
_____	_____

GUESTS TO INVITE

DATE	NAME
_____	_____
_____	_____
_____	_____
_____	_____

FREEZER STOCKING

DATE	ITEM
_____	_____
_____	_____
_____	_____
_____	_____

WHO IS COOKING

DATE	NAME	ITEM
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SHOPPING LIST

PRODUCE

BAKERY

DAIRY

MEATS AND FISH

DRY

FROZEN

HOUSEHOLD

PHARMACY

MISC
