



Week # \_\_\_\_\_

# RAMADAN WEEKLY MEAL PLAN

Day	Breakfast	Lunch	Dinner
Sunday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Monday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Tuesday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Wednesday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Thursday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Friday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy
Saturday	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy	Entrée: _____ Side: _____ Side: _____ Side: _____ <input type="checkbox"/> Meat/Protein <input type="checkbox"/> Fruits/Veggies <input type="checkbox"/> Grains <input type="checkbox"/> Dairy