



TrinkDichGesund

Überreicht durch:


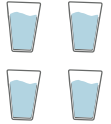
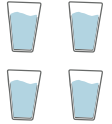
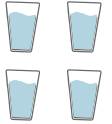



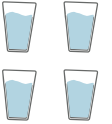








Empty box for name of the person who handed over the form.

Name, Vorname:

Meine optimale Trinkmenge:

Meine Trinkmenge heute:

Montag	Dienstag	Mittwoch	Donnerstag	Freitag	Samstag	Sonntag

 à 250 ml							
 à 330 ml							

Energie	
Emotionales Befinden	
	
	
	

Gedanken zum Tag:

Five horizontal dotted lines for writing thoughts about the day.