

# PRACTICE RECORD

(DUE EVERY MONDAY - 120 MINUTES PER WEEK)

STUDENT NAME: \_\_\_\_\_

DATES: \_\_\_\_\_

PERIOD (CIRCLE ONE):    1    2    3    4    5    6

MINUTES PRACTICED:

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

TOTAL MINUTES PRACTICED: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

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