

Mount Benson Band Practice Sheet

Month: April

Name: _____

Instrument: _____

1. Record the number of minutes you practice each day.
2. Before you hand this practice sheet in for marking, ask a parent or guardian to sign it in the space provided.
3. Give this form to Mrs. Murchie at the first band class of each month.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mar 30	Mar 31	Apr 1	Apr 2	Apr 3	Apr 4	Apr 5
Apr 6	Apr 7	Apr 8	Apr 9	Apr 10	Apr 11	Apr 12
Apr 13	Apr 14	Apr 15	Apr 16	Apr 17	Apr 18	Apr 19
Apr 20	Apr 21	Apr 22	Apr 23	Apr 24	Apr 25	Apr 26
Apr 27	Apr 28	Apr 29	Apr 30	May 1	May 2	May 3

Practice 20min/day, 5 days a week.

PARENT/GUARDIAN'S SIGNATURE

Please list other musical activities which may affect your time available for practice:
