

Mount Benson Band Practice Sheet

Month: June

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
Jun 1	Jun 2	Jun 3	Jun 4	Jun 5	Jun 6	Jun 7
Jun 8	Jun 9	Jun 10	Jun 11	Jun 12	Jun 13	Jun 14
Jun 15	Jun 16	Jun 17	Jun 18	Jun 19	Jun 20	Jun 21
Jun 22	Jun 23	Jun 24	Jun 25	Jun 26	Jun 27	Jun 28
Jun 29	Jun 30	Jul 1	Jul 2	Jul 3	Jul 4	Jul 5

Practice 20min/day, 5 days a week.

PARENT/GUARDIAN'S SIGNATURE

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