

Band Practice Sheet

Name _____

Date Due _____

Mond	Tues	Wed	Thurs	Fri	Sat	Sun	Sub Total	Credit	Total

I have faithfully and honestly practiced the times listed above. My parents have signed this sheet **after** the total was filled out!

Signature of Student

Signature of Parent/Guardian

NOTE: This form is due the first rehearsal day of the week and must be filled in completely (use 5 minute increments)! Any incomplete information, lateness or lack of required time will result in lowered weekly grades.

<u>Special Credit</u>		
<u>Occasion</u>	<u>Dates</u>	<u>Signatures</u>
Band Rehearsals	_____	None Needed
Lesson	_____	_____

Each one of the above is worth 15 minutes credit. Please total and put in the box above. Please note - to receive credit, each one of the above must be longer than 15 minutes.

Total Credit	
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2h 30m and above	100
2h 20m to 2h 29m	92
2h 10m to 2h 19m	84
2h to 2h 9m	76
1h 50m to 1h 59m	69
1h 40m to 1h 49m	50
Below 1h 40m or no practice sheet	0