		Practice Notes	Grade:	
			Class period:	
Name:			Date:	
Day	Scales	Exercises/Music		Time
Friday				
Saturday				
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Private lesson				
Parent signature			Total time:	
Name:		Practice Notes	Grade: Class period: Date:	
Day	Scales	Exercises/Music		Time
Friday				
Saturday				
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Private lesson				

Parent signature Total time: