

# RWPS BRASS BAND Practice Record



Name: \_\_\_\_\_

Term: \_\_\_\_\_

I plan to practice my instrument at the following times:

(i.e. before dinner on Monday, straight after school on Wednesday, before watching TV on Sunday etc)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

I agree to practice for 5-10 minutes each week at the times listed above.

If any of those times are not possible, I will find an alternative time.

**Student Signature:** \_\_\_\_\_ **Parent Signature:** \_\_\_\_\_

Record total home practice time for each day in minutes