

Name: _____

Class: _____

Required Practice:

1.5 Hours per Week
 (approx. 15 min. per day)

Practice Sheet – *November 2017 Elementary*

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

Weekly Time Practiced: _____

Parent Signature: _____

Weekly Time Practiced: _____

Parent Signature: _____

Weekly Time Practiced: _____

Parent Signature: _____

Weekly Time Practiced: _____

Parent Signature: _____

Practice Sheet Due: Week of Nov. 27-Dec. 1, 2017

*** Don't Forget to Do the Back!**