NAME:		Group #			Lesson Date:				
	For Practice					For As	sessment		
Warm Ups:									
Lesson Bool	x/(Bells):								
Lesson Bool	/(Snare):								
Concert Mus	ic:								
Scales/Rhytl	nms/Other:								
Write in the total amount of practice time per day. Total the times and have a parent initial it at the end of the row.									
Mon	Tue	Wed	Thu	Fri	Sat	Sun	TOTAL	Initial	
Notes/Spe	cial Instructio	ons:	1	1	1		1	1	

NAME:				Group #	Lesson Date:		e:		
	For Practice					For Ass	essment		
Warm Ups:									
Lesson Book									
Lesson Book	((Snare):								
Concert Musi									
Scales/Rhyth									
					initial it at the end			1	
Mon	Tue	Wed	Thu	Fri	Sat	Sun	TOTAL	Initial	
Notes/Special Instructions:									