Cedar Hollow Band Weekly Practice Log Name___ _____ Week _____ Assignment__ Music Practiced Time (minutes) Day Sunday Monday Tuesday Wednesday Thursday Friday Saturday TOTAL: _____ Practice requirements: 5th Grade: 100 minutes/week 6-8th Grade: 50 minutes/week Parent Signature Date **Weekly Practice Log Cedar Hollow Band** Name___ ______ Week _____ Assignment___ Music Practiced Time (minutes) Day Sunday Monday Tuesday Wednesday Thursday Friday Saturday TOTAL: _____

Practice requirements: 5th Grade: 100 minutes/week 6-8th Grade: 50 minutes/week

Parent Signature Date