STUDENT_____ PARENT SIGNATURE_____

LCMA BAND - April 2009

Total Hours_____

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
		1	2	3	4	5	
6 Hours_____	7 Hours_____	8 Hours_____	9 Hours_____	10 Hours_____	11 Hours_____	12 Hours_____	Weekly Total_____ Parent Initials_____
13 Hours_____	14 Hours_____	15 Hours_____	16 Hours_____	17 Hours_____	18 Hours_____	19 Hours_____	Weekly Total_____ Parent Initials_____
20 Hours_____	21 Hours_____	22 Hours_____	23 Hours_____	24 Hours_____	25 Hours_____	26 Hours_____	Weekly Total_____ Parent Initials_____
27 Hours_____	28 Hours_____	29 Hours_____	30 Hours_____	PRACTICE CHART DUE MAY 1st			Weekly Total_____ Parent Initials_____

PRIVATE INSTRUCTOR SIGNATURE_____