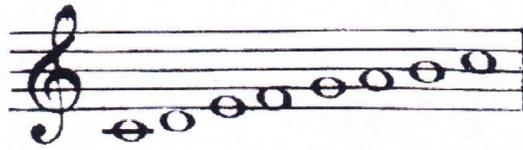


# MUSIC PRACTICE SCHEDULE

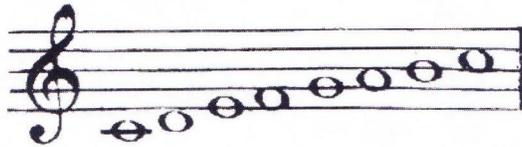


Student Name: \_\_\_\_\_  
 School Name: \_\_\_\_\_  
 Teacher Name: \_\_\_\_\_

	5	10	15	20	25	30	Exercises:
<b>Monday</b>							
<b>Tuesday</b>							
<b>Wednesday</b>							
<b>Thursday</b>							
<b>Friday</b>							
<b>Saturday</b>							
<b>Sunday</b>							

Instructions: Color in one note for every five minutes that you practice. Write down all the exercises or music pieces that you practiced in the space provided.

# MUSIC PRACTICE SCHEDULE



Student Name: \_\_\_\_\_  
 School Name: \_\_\_\_\_  
 Teacher Name: \_\_\_\_\_

	5	10	15	20	25	30	Exercises:
<b>Monday</b>							
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