

## Written Weekly Practice Record

Name: \_\_\_\_\_ Class Period: \_\_\_\_\_

**Date**                      **Music Practiced**                      **Minutes**


**TOTAL Minutes:** \_\_\_\_\_

*Reason for submitting paper card:*

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

*Carmel Middle School Orchestras*

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