

Name _____ Student Signature _____

100 minutes are required during the week for the maximum weekly practice points. Fill out entire sheet and turn in on the **Tuesday** of the following week.

Dates Month:	Practice Assignment	Minutes Practiced
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		
Monday		
Total Minutes		

Parent/Guardian Signature _____

Name _____ Student Signature _____

100 minutes are required during the week for the maximum weekly practice points. Fill out entire sheet and turn in on the **Tuesday** of the following week.

Dates Month:	Practice Assignment	Minutes Practiced
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		
Monday		
Total Minutes		

Parent/Guardian Signature _____