

Practice Log:

Write down how long you practiced for, what you practiced, and have your parents initial the page!

Week of _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time:							
What You Practiced:							
Parent Initials:							

Week of _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time:							
What You Practiced:							
Parent Initials:							

Practice Program Details:

Ages 4-11

Level:	Goal:	Earn:
1	Practice for 15 minutes, four times in one week	One item from the small box
2	Practice 15 minutes every day in one week	One Item from medium box
3	Complete Level 1 or level 2 six times in a row	One item from the big box
4	Complete Level 3 four times in a row	One item from the bigger box
5	Complete Level 4 three times in a row	One item from the deluxe box

Ages 11-17

Level:	Goal:	Earn:
1	Practice 30 minutes a day, five days a week	One item from the small box
2	Complete Level 1 eight times in a row	One item from the big box
3	Complete Level 2 three times in a row	One item from the bigger box
4	Complete Level 3 three times in a row	One item from the deluxe box

