

September Practice Sheet

Name: _____

Date

Assignment

_____	_____
_____	_____
_____	_____
_____	_____

Please mark with an X the days in which you practice at least 15 minutes:

September 2015 Calendarpedia
Free resource for teachers

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3

© www.calendarpedia.com All Rights Reserved

Parents/Guardians – Please have a conversation with your student and determine what time of day works best for daily practice. Indicate the designated time below.

Please visit our website www.plymouthinstruments.com , read the handbook and sign below that you understand the expectations.
