



## PRACTICE AGREEMENT

Student Name \_\_\_\_\_

Having discussed the importance of focused practicing with my teacher, I agree to commit myself to \_\_\_\_\_ minutes of practicing a day for \_\_\_\_\_ days a week.

I make this agreement for the entire term and understand that good practice habits will help me become a better musician and enjoy music even more!

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_