

Date: ____ / ____ - ____ / ____

Required Practice Time: _____

| | TIME | X's 1 st | SCLS | THRY |
|---------------|------|---------------------|------|------|
| Tu | | | | |
| W | | | | |
| Th | | | | |
| F | | | | |
| Sa | | | | |
| Su | | | | |
| M | | | | |
| Tu | | | | |
| Total: | | | | |

Code: S~Sick, V~Vacation

Parent's Initials: _____

Parent's Comments: _____

REV 5.10.04

Date: ____ / ____ - ____ / ____

Required Practice Time: _____

| | TIME | X's 1 st | SCLS | THRY |
|---------------|------|---------------------|------|------|
| Tu | | | | |
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| Su | | | | |
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| Tu | | | | |
| Total: | | | | |

Code: S~Sick, V~Vacation

Parent's Initials: _____

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REV 5.10.04