Appendix 8.3

**SAMPLE PRACTICE CONTRACT**

Included here are a few options for downloadable practice contracts which may be adapted to the local Salvation Army music program. Items in brackets should be filled out with individual corps information. For **Home Practice Suggestions**, see Appendix 8.4 --*For parents and caregivers -* How you can help your children’s progress on their instrument; and *For students* - How to establish warm-up and practice routines. Appendix 3.1 has more on **Entrance and Practice Policies.**

**PRACTICE CONTRACT FOR PARTICIPATION IN**

**THE SALVATION ARMY MUSIC PROGRAM**

[Corps name

Street address,

City, State, ZIP Code,

Contact information]

I understand that in order to receive music instruction at the Salvation Army music program each week I must have excellent attendance and commit to practice my instrument on a consistent basis:

* Beginner: Levels PRIMER and ONE 10 minutes a day, 5 days each week
* Intermediate: Levels TWO and THREE 20 minutes a day, 5 days each week
* Advanced: Levels FOUR and FIVE 30 minutes a day, 5 days each week

If I do not maintain required attendance with consistent, good behavior and/or show evidence of regular practice, I will not be permitted to continue in the music program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature Parent or Caregiver Signature/Date

**COMMITMENT FORM**

**THE SALVATION ARMY MUSIC PROGRAM**

[Corps name

Street address,

City, State, ZIP Code

Contact information]

I have read the standards and expectations for the Salvation Army music and arts program and I will:

\_\_\_\_ Attend all classes/rehearsals and participate in any performances

\_\_\_\_ Arrive on time

\_\_\_\_ Speak and respond to my leaders and peers with respect

\_\_\_\_ Inform my leaders when I cannot attend rehearsal

\_\_\_\_ Dress modestly and observe the guidelines for recital and Sunday uniform

\_\_\_\_ Practice my music on a regular basis (a minimum of ten minutes a day, for five days a week). Parents/guardians are asked to initial their child’s practice chart and send it to rehearsal with the child each week.

\_\_\_\_ Be responsible with my instrument and music

If I do not maintain good behavior, show evidence of regular practice and/or be lacking in the required attendance, I will not be permitted to continue in the music program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Parent or Guardian Signature/Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address Parent Contact Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Parent Email Address

I give permission for my child’s photo to be used for Salvation Army purposes:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parent or Guardian Signature/Date

**PRACTICE REPORT**

**THE SALVATION ARMY MUSIC PROGRAM**

[Corps name

Street address,

City, State, ZIP Code

Contact information]

I understand that in order to receive music instruction at the Salvation Army music program each week I must have excellent attendance and commit to practice my instrument on a consistent basis:

* Beginner: Levels PRIMER and ONE 10 minutes a day, 5 days each week
* Intermediate: Levels TWO and THREE 20 minutes a day, 5 days each week
* Advanced: Levels FOUR and FIVE 30 minutes a day, 5 days each week

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instrument: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **WEEK** | **DATE** | **M** | **T** | **W** | **TH** | **F** | **S** | **SU** | **TOTAL MINUTES** | **PARENT’S SIGNATURE****SIGNATURE** |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |