







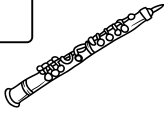



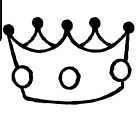
























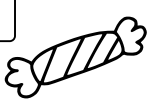








Name: _____ Level: _____

Fill in the practice dates in the box in the top left corner. Color in 1 square for each day of practice minutes completed. Have a parent initial the square when you are done. To submit your log, go to AustinsViolinShop.com or return it to our Shop on the last day of the challenge.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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