Amagansett School Recorder Practice Sheet

This sheet should be completed by the student BEFORE each class and then signed by a parent or guardian who monitored the students' practicing.

STUDENT NAME_____

| Day of the Week | On this day, I practiced | How many Minutes | Signature |
|--------------------|--------------------------|---------------------|-----------|
| Sunday | | | |
| Monday | | | |
| Tuesday | | | |
| Wednesday | | | |
| Thursday | | | |
| Friday | | | |
| Saturday | | | |

1) Can I play long tones on the notes I know? Remember, long tones are long,

A Ab B Bb C C# D Db E Eb F F# G Gb

clear tones that keep a steady and consistent pitch.....