



THE CONSERVATORY
PRACTICE-A-THON SPONSOR SHEET

#	Sponsor Name	Email	Pledge Amount	Type of Pledge	Minutes Practiced	Amount Due	Donation Recieved
Ex.	Mr. Music	music@aol.com	\$2.00	<input checked="" type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation	15	\$30.00	x
Ex.	Mrs. Cleff	treble@gmail.com	\$50.00	<input type="checkbox"/> Per Minute <input checked="" type="checkbox"/> Flat Donation		\$50.00	x
1				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
2				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
3				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
4				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
5				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
6				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
7				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
8				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
9				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
10				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
11				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
12				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
13				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
14				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
15				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
16				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
17				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
18				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
19				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	
20				<input type="checkbox"/> Per Minute <input type="checkbox"/> Flat Donation		\$	

Total Minutes: _____

Grand Total: \$ _____

Student Name: _____ Date: _____

Parent Name: _____ Date: _____