



Worship

Worship Faith Habit Practice Form

10 Practices Needed by August 2021

Your Name: _____ Grade: _____

Today's Preacher: _____ Date of Service: _____

Church Season and color (if applicable): _____

Sermon Title (Make one up if it's not in the bulletin): _____

Lesson(s) read in church (circle the one used in the sermon): _____

What stands out to you from the lesson read? Why? _____

What lesson was the sermon teaching you? _____

Where do faith & life connect for you from this service? _____

What part of the service did you enjoy the most? Why? _____

Your signature: _____

Authorized Adult signature: _____

