

Learn & Grow Faith Habit Practice Form

6 Practices Needed by August 2021



Your Name: _____ Grade: _____

Event or Class Name: _____

Date(s) and Time(s) of event: _____

Describe what you did, talked about, or experienced. _____

What is one new thing you learned from this? If you didn't learn anything new, what is one thing you already knew but is worth repeating? _____

What is one thing you will take away from this learning? _____

What is one thing you would like to know more about from this? _____

Your signature: _____

Authorized Adult signature: _____

