

Worship Reflection

Name: _____ Date: _____ Grade: **6** **7** **8** Leader: _____

Sermon Title: _____ Scripture Reading: _____

LISTEN (*Write the key words or phrases that jumped out to you from the sermon:*)

REFLECT (*Write how the sermon relates to your life now, things you know, have done, or questions that you have:*)

PRAYER REQUEST (*How can God help you or someone you love?:*)

VISUALIZE (*Draw a picture related to the sermon or scripture:*)

OPTIONAL

Parent signature

Leader approval of worship reflections

____ of 16