Holy Angels Parish Reflection Form

Child's Name: _____ Level: _____

Event: _____ Date of Event: _____

Priest or Hosting Ministry: _____

WE are so glad you attended! Please tell me about your experience. You can choose 3 of the 4 items below to talk about or tell me something else about the event or use your artistic gift.

- **What was the event for?**
- **How did you think Jesus was present in the event?**
- **Have you ever been to this type of event?**
- **How can this event help people?** *Please use back/ attach paper if needed.*

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Parent Name: _____ Email: _____