

Life Teen

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

E-Mail: _____

Birthday: _____

School: _____

Grade: _____ Graduation Year: _____

Are you Catholic? _____

What sacraments have you celebrated...

Baptism ____ Communion ____ Penance ____ Confirmation ____

What are you involved in at school?

What are you involved in outside of school?

If you could ask any question about the church or your faith, what would you want to know?

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