Sunday

DATE

This exercise can be done either Sunday night or the next day. Think back to how your family observed the Sabbath this week and mark an "X" on each line to indicate where you think you landed ("10" being a complete success).

PRAYER

Did your family take additional opportunities for prayer and reflection?

What was going on at your parish today? Did you participate?

How did you experience God's voice in the course of your day?

0 ______10

NOTES



WORSHIP

Did your family attend Mass?

How prepared did you feel for Mass when you arrived? What contributed to your feeling prepared or not?

Can you point to any specific graces received during the liturgy?

0 _______10

NOTES



REST AND RECREATION

Did you experience genuine rest?

What activities brought you rest versus stress?

Did you feel the urge to "be productive?" If so, how did you respond to that feeling?

Were you able to freely experience leisure and rest or were you distracted by worries about the upcoming week?

0 _______10

NOTES



SERVICE

What opportunities presented themselves to you to bless someone in need?

Were you "interruptible" throughout the course of your day in order to serve others?

What does weekly tithing look like for your family?

NOTES



INTENTIONALITY

Did technology help or hinder your experience of entering into the Sabbath this week? If you limited your use of technology, what did you replace it with? Did you find ways to incorporate music, time in creation, or beautiful art/music into your day?

What was the most meaningful conversation or moment of connection during the day?

NOTES



COMMUNITY

Did you set aside time to do something fun together as a family? Did you find ways to spend time with friends and extended family? Were you open to meeting someone new at Mass or in your daily activities?

Was your family/home a place of hospitality for someone else?

0 _______10

NOTES



WHAT WAS YOUR OVERALL EXPERIENCE OF SUNDAY?

WHAT <u>ONE</u> ADJUSTMENT WOULD YOU LIKE TO MAKE NEXT WEEK?