

Name:		Birthday [MM/DD]:	
Monogram [first initial, last initial, middle or maiden initial]:		Shirt Size:	
Fun Facts About Me [such as family, pe			
Favorite Salty Treats:			
	Favorite Beverages:		
Favorite Coffee Shop Drink:			
	Fresh Scent:		
Favorite Stores:			
Favorite Restaurants:			
Favorite Hobbies:			
Favorite Holiday:	Favorite Spor	rts Teams:	
Favorite Ways to Relax:			
Favorite Date Night or Special Occas	sion Night:		
Favorite Weekend Activities:			
School Supply Favorites or Classroo	m Needs:		
Other Favorites Not Listed:			
Allergies or Restrictions:			

2023-2024