ietary restrictions:



		School Year:	2022-202
Name: Birthday: Shirt Size: Perferred Mon	XL	lloway	Allergies/d
Color: Green Scent: Fall? Hobby: Outloo To Collect: O Animal: dog	r stuff, fi IJ Stuff!	shing, hiking	
Music/Author: Singer/Song/B TV Show:too Movie:	and: <u>Van</u>		
Hot Drink: By Cold Drink: Dr Sweet Snack: Salty Snack:	Pepper Peanut Bu		
Inside Activity: Outside Activit Fun Thing to D Sport/Team:	y: <u>Likingif</u>	isling	USIC
Place(s) to Sho Restaurants:	p: Acader	my, Home Dep	ot es

Luxury/Indulgence/Treat:

I want to learn more about: gardering

Select One:

CITY -OR- COUNTRY
SPRING -OR- AUTUMN
READ -OR- WRITE
COLORFUL -OR- NEUTRALS
SCHEDULE -OR- SPONTANEOUS

