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| Name & birthday: |
| Candy, snacks or drinks: |
| Places to eat or shop: |
| Activities or hobbies: |
| Favorite ways to relax or pamper yourself: |
| Favorite gifts to receive: |
| Not so favorite gifts to receive: |
| Favorite teaching item or school supplies to receive: |
| Favorite scent, lotion or candle: |

It means the most to me when the parents of my students: