

Dear Teacher, we love getting to know you! Please kindly fill out the following survey and return it back to me. Thank you!

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NAME: Elisabeth Brennan

(LASS: M/W 18-24 mos.

BIRTHDAY: 4/12

MONOGRAM: EBS

Allergies Dislikes (EX. ALLERGIC TO PEANUTS OR NO COFFEE MUGS)

Allegic to Seafood

favorites

(OLOR:	Light	Aqua	/Pink

HOT DRINK: Coffee

COLD DRINK: <u>Seltzer Water</u>

FLOWER/PLANT: Daisies
Old Mary
PLACES TO SHOP: Target, Loft

RESTAURANT: Any Japanese Restaurant

STARBUCKS/DUNKIN': Starbucks

GIFT CARD: Target or Amazon

Reese's Cups

SWEET TREAT: Dark Chocolate

SALTY TREAT: Doritos

BEER/WINE: NA

ACTIVITY AT SCHOOL:

Arts and crafts / Music & Move

TO DO ON OFF DAYS:

Read, Craft, Exercise