these are a few of NAME: ~ **CAMPUS:** BIRTHDAY: \(\) ALLERGIES/DIETARY RESTRICTIONS: If you received a gift card for the amounts below, where would you want them to be? \$10 Monogram (or name for monogram purposes) Candles/Lotion YAY or NAY (if YAY what scent(s) How do you relax: _ Doblas Hobbies: Rad **Favorite Sports Team:** Sit down Restaurant(s) ____ Sonic Drink:_ _____ Candy: _ What school supplies do you find yourself buying the most throughout the year? Is there anything you prefer not to receive or have enough of?

Randolph Field Independent School District Parent Teacher Organization