



My Name: \_\_\_\_\_ Position: \_\_\_\_\_

My Birthday is: \_\_\_\_\_ Favorite Sweets: \_\_\_\_\_

My Favorite Places to Shop: \_\_\_\_\_

\_\_\_\_\_

Favorite Places to Eat: \_\_\_\_\_

\_\_\_\_\_

My Favorite Drinks and Snacks: \_\_\_\_\_

\_\_\_\_\_

My Hobbies: \_\_\_\_\_

I Collect: \_\_\_\_\_

I'm Allergic to: \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_