<b>PTO Getting To Know You 2024–2025</b> Let us know a little about you!
First & Last Name * Linda Peery
Your Campus Building Location *
Elementary
Middle School
High School
O Other:
Your Birthday *
MM DD YYYY
09 / 04 / 1994
Grade(s)/Classes Taught or Job Title *

1st grade

Favorite Color * Blue		
Favorite Candy * Nerds Gummy Clusters		
Favorite Scent * Vanilla and Coconut		
Favorite Cookie * Chocolate chip		
Favorite Coffee or Tea * Peppermint Mocha Latte		
<b>Favorite Drink *</b> Dr. Pepper		
<b>Favorite SONIC Drink *</b> Dr. Pepper		

## Favorite Restaurant \*

Tacos for Life

Favorite Snack \*

All things sweet and salty!

Favorite Gift Cards \*

Walmart, Target, Food

## Favorite Hobby \*

Reading

Is there anything that you prefer not to receive, are allergic to, or simply have too much of?

Kiwi Allergy

Which of the following describes you? Check all that apply. *
Gluten Free
Dairy Free
Sugar Free
Nut Free
No dietary restrictions
Other:
WISH LIST: * Please, list some items for your classroom/workspace. (Things for this list could be items for rewards, decorations, supplies, etc.) Treasure box items, candy for candy bucket, stickers, etc.
Is there anything else that you would like us to know about you?
We are thankful for you!
This form was created inside of Arkansas Christian Academy.
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