

PTO Getting To Know You 2025-2026

Let us know a little about you!

Email *

rbonnette@archristian.org

First & Last Name *

Rylee Bonnette

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

07 / 09 / 2005

Grade(s)/Classes Taught or Job Title *

Teachers aide

Favorite Color *

Purple

Favorite Candy *

Sweetart ropes

Favorite Scent *

Vanilla, fall smells

Favorite Cookie *

Sugar cookie

Favorite Coffee or Tea *

Can't have coffee! Don't like tea

Favorite Drink *

Dr.pepper/ water

Favorite SONIC Drink *

Ocean with vanilla

Favorite Restaurant *

Chick fil a

Favorite Snack *

White chocolate covered pretzels

Favorite Gift Cards *

Target, hobby lobby, Walmart, amzon

Favorite Hobby *

Puzzles, reading books!

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

I can't have milk chocolate! Allergic to coco powder. I can have white chocolate

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.)

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Is there anything else that you would like us to know about you?

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This form was created inside of Arkansas Christian Academy.

Google Forms