

PTO Getting To Know You 2025-2026

Let us know a little about you!

Email *

rpaddy@archristian.org

First & Last Name *

Reed Paddy

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

04 / 16 / 2001

Grade(s)/Classes Taught or Job Title *

Coach / Teacher

Favorite Color *

Black

Favorite Candy *

Mike and Ike

Favorite Scent *

Something manly

Favorite Cookie *

Chocolate Chip

Favorite Coffee or Tea *

Hot Mocha coffee

Favorite Drink *

Coke

Favorite SONIC Drink *

Vanilla Coke

Favorite Restaurant *

Chick Fila

Favorite Snack *

Chips

Favorite Gift Cards *

Starbucks

Favorite Hobby *

Basketball

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

N/a

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.)

A world map

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

No, thank you!

This form was created inside of Arkansas Christian Academy.

Google Forms