

NAME





Slopper's Preference Card PHONE

SIGNATURE AUTHORIZING INFO SHARIN

SIGNIFICANT OTHER NAME, EMAIL & PHONE TO NOTIFY OF GIFT IDEAS:

IMPORTANT DATES:				
(BIRTHDAY/ANNIVERSARY)				
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COLORS:

TEA/COFFEE (DECAF?):

SMELLS:

WINE (RED/WHITE?):

FOODS:

KITCHEN NEEDS:

GIFTS:

FAVORITE RELAXING ACTIVITY:

SPECIFIC WISH ITEMS:

DIETARY RESTRICTIONS & ABSOLUTELY NO:

