

SECRET SISTER

Name: _____	Birthday: _____
Address: _____	Anniversary: _____
City: _____ State: __ Zip: _____	Pledge Date: _____

Email Address:

Cell Phone #:

Jewelry: Ears Pierced _____ Yes _____ No **Prefer:** Gold tone _____ Silver tone: _____

Favorites:

Candle Scent: _____ Perfume: _____ Books/Author: _____

Collectible: _____ Wax Melt Scent: _____ Snacks: _____

Restaurant: _____ Nail Salon _____ Gift Cards: _____

Hobby: _____

Charity/s _____

Home Colors:

Living Room: _____ Bedroom: _____ Kitchen: _____

Bathroom1: _____ Bathroom 2: _____

Personal Colors/Size

Colors: _____ Size Top: _____

Other Clothing Size: _____

Other Information you would like to share: (Dislikes, Food Allergy, Special Interest, etc.)

Secret Sister Chair-Liddie Farabee
807 N. Elm St, Owasso, Ok 74055
lesliefarabee@gmail.com