

SECRET SANTA



Wishlist Questionnaire



NAME _____

★ MY FAVORITES

Color _____

Restaurant _____

Store _____

Candy _____

Snack _____

Scent _____

Sports Team _____

Hobby _____

Show _____

Movie _____

Music/Artist _____

Flower _____

Drink _____

Gift to Receive _____



THIS OR THAT

☐ Sweet

☐ Salty

☐ Coffee

☐ Tea

☐ Candle

☐ Fragrance

☐ Alcohol

☐ Non-Alcoholic

☐ Beer

☐ Wine

☐ Chocolate

☐ Candy

☐ Books

☐ Audio

☐ Movies

☐ Netflix

☐ Cook

☐ Order In

☐ Online

☐ Mall

☐ Handmade

☐ Store Bought

☐ Lotion

☐ Bath Bomb

☐ Cute

☐ Useful

Allergic to _____

I ABSOLUTELY LOVE

I REALLY NEED

I DON'T LIKE

I DON'T NEED
