

Holiday/Birthday Wish List Questionnaire

Special Day :

Circle one:

Breakfast in Bed: Yes NO

Candy or treat: Yes No

Flowers: Yes No

Balloons : Yes No

Dinner: home restaurant

If at home: fancy or simple

Requests for menu item _____

Request for desert _____

Friends over to join us: Yes No

If yes Which Friend: _____

Gift: Homemade or store bought

Price Min _____ Price Max _____

Gift Idea 1. _____

Gift Idea 2. _____

Gift Idea 3. _____

Time with family:

Children away from home for _____ hours.

Any special requests or wishes?
