

PLEASE PRINT

(one per Child)

Needs to be back to the RHJ Box Office by Tuesday, November 23, 2021

Grandparent's Name: _____

Grandparents Phone #: _____ SCW Rec #: _____

Name of Child: (First & Last) _____ M__ F__

Address: _____

City: _____ State: _____ Zip Code: _____

Age of Child: _____ Grade: _____

Favorite Subject: _____

Name of a Best / Close friend: _____

Items on Christmas List _____
