



Santa's Calling

Parent Questionnaire

Parent's Names: _____ Sponsor Rank: _____

Contact Phone # _____

Contact Email: _____

Please mark your 1st, 2nd, and 3rd choices Santa's call. (Write next to it.) Times are contingent on volunteers and volume of calls. We will confirm your time with you. Siblings will take turns on the call. Please indicate if you need a different date or time for other children.

Thursday, Dec 3

5:45 6:00 6:15 6:30 6:45 7:00 7:15 7:30

Tuesday, Dec 8

5:45 6:00 6:15 6:30 6:45 7:00 7:15 7:30

Tuesday, Dec 15

5:45 6:00 6:15 6:30 6:45 7:00 7:15 7:30

Child 1:

Name: _____ Age/Grade: _____

Favorite Activity: _____

Pet's Name(s): _____

Siblings Name(s): _____

Anything Else Santa Should Know? _____

Child 2:

Name: _____ Age/Grade: _____

Favorite Activity: _____

Pet's Name(s): _____

Siblings Name(s): _____

Anything Else Santa Should Know? _____

Child 3:

Name: _____ Age/Grade: _____

Favorite Activity: _____

Pet's Name(s): _____

Siblings Name(s): _____

Anything Else Santa Should Know? _____

Child 4:

Name: _____ Age/Grade: _____

Favorite Activity: _____

Pet's Name(s): _____

Siblings Name(s): _____

Anything Else Santa Should Know? _____
