Fantasy Shopping Spree

Planning sheet

Student’s Name ____________________________

Family Member: _____ Father  _____ Mother

_____ Brother Name: ____________________________  Age _________

_____ Sister Name: _____________________________  Age _________

What does this person like to do?: __________________________________________

___________________________________________________________________________

What sort of thing would this person like? ___________________________________

___________________________________________________________________________

List some gifts they would like: ____________________________________________

___________________________________________________________________________

Paste your choice here:

http://specialed.about.com