



Getting to Know You

First Name

Last Name

Date of Birth

Spouse/Significant Other

Last Name

Date of Birth

Children

First Name

Last Name

First Name

Last Name

First Name

Last Name

First Name

Last Name

Favorites

Cold Drink

Hot Drink

Snack

Food

Dessert

Restaurant

Hobby

TV Show

Other Favorites

Music Group/Artist

Sport to watch/play

Favorite Sports Team

Significant Life Reflections

Life Celebration (Past)

Life Celebration (Present)

Future Life Dreams

If you could travel anywhere, where would it be?

If you could have dinner with anyone, who would it be? (Either a person alive or deceased)

Other Significant Dates in Your Life i.e. anniversaries, losses, celebrations