



My full name:

Nickname:

My age: My favorite subject in school:

My favorite music or band:

My favorite animal:

The city and state I live in: My favorite color:

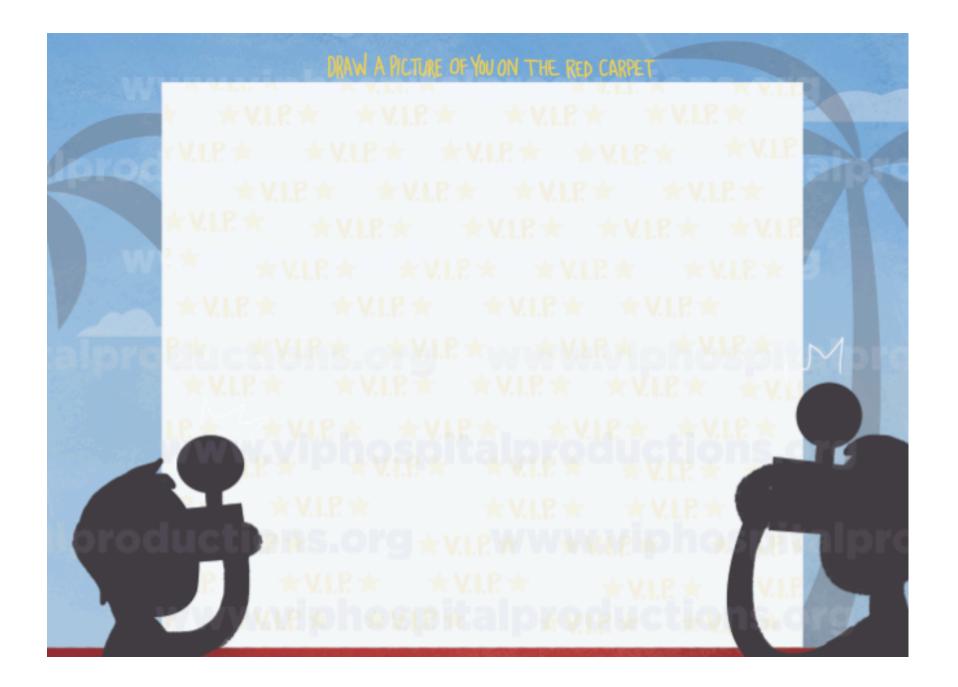
I one day hope to visit: My favorite food:

Things I love: My special talents:

My favorite movie/T.V. Show: Things I hate:

My favorite book:

When I'm with my friends I like to:





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Trace your left hand and on each finger write one great thing about youl

MEMBERS OF MY ENTOURAGE

Doctors

Nurses

Other People at the Hospital

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CREDITS

Be proud of the amazing things you have accomplished! Post this list on your wall and add to it everyday.

1. I stayed overnight in the hospital!

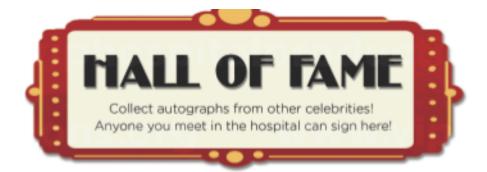
3.

5.

6 6.

7.

8.





Someone who wears glasses

Someone who has black socks





Someone who can do the 'YMCA' dance

Someone who likes roller coasters





Someone who can juggle

Someone who has a cat



