



# Your One Wish – Application Form

## Wish Recipient Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email \_\_\_\_\_

What is your relationship to the child you are applying for? \_\_\_\_\_

**Please tell us the reason you are applying for a wish for this child? (Please provide us with a photocopy of paperwork of an official diagnosis or any other paperwork that supports the application)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please outline the details of the child's wish request?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**Please provide us with the contact information of two professional referees who can support your application for the wish:**

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**Please include a photocopy of a valid ID for the child you are applying for with this application form.**

**Thank you for applying for a wish from Your One Wish. Your application will now be reviewed and we will contact you once we have reached a decision based on our eligibility criteria.**

**Please email this form and supporting documents to [info@youronewish.co.uk](mailto:info@youronewish.co.uk)**