



Wish Application Form



For a child to have a wish granted by Starlight, the child must:

- Be diagnosed with a life-threatening/life-shortening condition
- Be referred for a wish while undergoing treatment
- Be aged between 4 and 18 (inclusive) at the time of referral
- Be a UK resident
- Not have received a wish from either Starlight or another wish granting organisation

Date

Child details:

Child's full name

Date of Birth

Male

Female

Condition

Hospital/hospice attended

Parent details

Full name

Address

County

Postcode

Email address

Tel

Mobile

Referrer details

If not the parent

Full name

Address

County

Postcode

Email address

Tel

Mobile

Relationship to child

How did you hear about Starlight?

Please return the completed form to:
Wish Granting Department

By post:

Starlight Children's Foundation
3rd Floor, 227 Shepherds Bush Road | London | W6 7AU

By email:

wishes@starlight.org.uk

By fax:

020 8748 8661

