About Make-A-Wish New Zealand

Our belief is that a wish is life-changing - this guides us in everything we do at Make-A-Wish New Zealand.

When a wish comes true, it creates hope, strength and joy.

A wish is vital.

We carefully design each child's wish to build anticipation and resilience to help in the fight for their health.

Global research by Make-A-Wish tells us that wishes aid physical and emotional healing through building strong positive experiences.

The power of a wish inspires the wish child and has a ripple effect for family and community.

Wishes provide laughter, fun and create life-changing memories, but they also continue to inspire confidence and strength long after the wish has been granted.

Wishes help to normalise each child's journey, and vitally improve their quality of life by helping to give them a positive outlook - at a time when they need it the most.





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Visit us

www.makeawish.org.nz
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Wish Application Form



Toby-Jack 9 years old "I wish to have a miniature

Welcome to Make-A-Wish New Zealand

Dachshund puppy"

We make the wishes of critically ill children and young people (3-18 years old) come true.

For our younger wish children aged 3 to 5 years old who are unsure of their wish, we provide a wish box full of toys. A child who receives a wish box will also be eligible for their full wish from age 5 to 18 years old. Wish applications must be received by the wish child's 18th birthday.

Make-A-Wish New Zealand has amazing volunteers who work with you and your child to develop and tailor a wish that is about their hopes and dreams.

Once your completed application is approved, we'll take your child on a unique wish journey towards making their cherished wish come true. Helping your child dream and plan for their wish helps build resilience and brings hope for their future.

We will walk alongside you as we work to create life-changing memories.

The Power of the Wish Journey



Wishes do come true...

Frankie 3 years old

"I wish for a doll's house"





Joel 16 years old

"I wish to get up close and personal with some animals"



"I wish to go to Queenstown"





 $Sarah_{\,16\,\text{years old}}$

"I wish I wish to have a Tā moko traditional tattoo"

How to apply for a Wish

There are several steps to ensure that the child receives their cherished wish.

1. Complete the Wish Application form

This form must be completed and signed by a parent or legal guardian of the child and returned to Make-A-Wish New Zealand.

2. Medical Eligibility

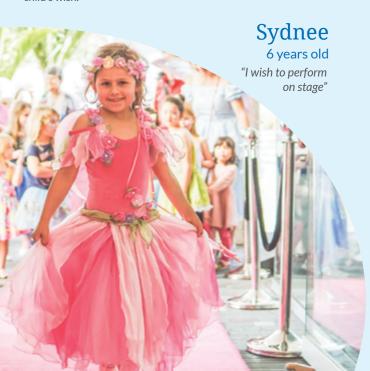
Make-A-Wish New Zealand contacts the child's medical specialist and asks to receive in writing whether the child is medically eligible to receive a wish. Wish recipients must hold New Zealand residency.

3. The Wish

Once the medical specialist has confirmed that the child is eligible, Make-A-Wish New Zealand assigns two wish volunteers. They arrange to meet the child, along with the legal guardians, to help determine what their cherished wish will be. Some children know exactly what they want, others take some time and it can take more than one visit before the wish is decided.

4. Granting the Wish

Once the wish has been confirmed, the Make-A-Wish New Zealand team sets out to create a unique experience for the child . The timing of the wish delivery can vary, depending on what it is and the health of the child. Every effort is made to include the immediate family in the child's wish.



Frequently Asked Questions

How can I refer a child for a wish?

Make-A-Wish New Zealand accepts referrals from the child's parent/ guardian, a medical professional, or even the child themselves. If you would like to refer a child but are not their legal guardian or doctor, we encourage you to contact the child's family and have them complete the referral process themselves.

How long does it take to grant a wish?

Because every wish is unique, there's no set time frame. The length of time it takes to fulfill a wish varies on the nature and scope of the wish.

• Who is included in the wish?

We work with each family to ensure that important family members are involved in the child's wish.

 Does a family have to meet financial criteria to be eligible to receive a wish?

Not at all. Make-A-Wish New Zealand does not discriminate based on a family's financial situation.

Does the family have to pay anything for the wish?

Make-A-Wish New Zealand cover all costs to deliver the wish as agreed with the family of the wish child.

Where does the money for granting wishes come from?

Make-A-Wish New Zealand is a charity and receives no government funding and relies on funds donated by generous individuals, businesses, trusts, community fundraising and events.



For further information or to read wish stories, go to: www.makeawish.org.nz



By signing the wish request form, you authorise Make-A-Wish New Zealand to collect, maintain, use and disclose the personal information in the manner set out in the Privacy Statement.

This section must be signed in order for the wish request to be processed.

I agree to the following:

- I/we acknowledge that no promises or assurances whatsoever have been made to me/us by any representative of Make-A-Wish New Zealand regarding this wish application.
- All wish requests are subject to approval by Make-A-Wish New Zealand and they may produce a copy of this application to the medical specialist as evidence of that authority.
- All wish information required regarding the health of the child in this application may be released by the medical specialist to Make-A-Wish New Zealand.
- I will not enter into any discussions or negotiations with third parties or suppliers in relation to the fulfillment of my child's wish, unless I have written permission from Make-A-Wish New Zealand.
- I have read and understood the Privacy Statement below and I consent to the collection, issue and disclosure of personal information in line with the Privacy Statement.
- Where I have provided information about another individual, I declare that the individual has been made aware of that fact and of the contents of the Privacy Statement.

Looking after your Privacy

Your right to privacy is important to us. This statement explains your privacy rights and our obligation and rights in relation to collection and use of your personal information.

* Please refer to our privacy policy on the Make-A-Wish New Zealand website, www.makeawish.org.nz/privacy-policy

Please sign	Mother	Father	Legal Guardian (please tick)
Name			
Name			
Sign			
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* Legal guardian details (please complete all fields) * Child's details Medical information Child resides with (please tick) First name Child's illness and current health status_ Mother + Father Shared custody Legal Guardian Father ___Surname___ Guardian 1 Middle name. Known as Relationship to child_ First name, Age__ Residential address_ Surname Can your child communicate verbally (Y/N) Address (if different from child)__ Is the wish medically urgent (Y/N) Suburb Is your child mobile (Y/N) Post Code_ Suburb_ City____ _____ Post Code__ Home No_ _Work No_ ⋆ Medical Specialist NHI No_ Mobile No First name_ * Cultural considerations Email_ Knowing as much as we can about your family helps us to deliver the best Guardian 2 Hospital and Department where specialist treats your child. possible wish experience for your child. To ensure that Make-A-Wish New Zealand is aware of any cultural sensitivities, please indicate the Relationship to child_ cultural group your child identifies with. First name_ Department_ NZ European Samoan Other (Please state) Address (if different from child)__ Phone No (and extension if applicable)_ Email_ Is English the first language Y/N _ City___ Post Code_ Suburb_ If no, please specify your child's first language_ Make-A-Wish New Zealand will contact this medical specialist to determine your child's eligibility. Home No_ _Work No_ Social Worker Case Worker **Nurse Specialist** Are you a NZ Resident? Y/N Mobile No_ * Wish Request Email_ Your child does not need to know their wish at this stage, however if they have an idea, please Surname_ briefly describe below: ⋆ Sibling details Organisation / Hospital__ Full name DOB Resides with child (Y/N) Phone No (and extension if applicable)____ Email Return this form to Make-Wish-New Zealand * How did you hear about Make-A-Wish Please complete both sides of this form and return to us via New Zealand? * Details of other people in the household Email: info@makeawish.org.nz Full name Relationship to the child Gender Medical Consultant / Doctor / Nurse Friend or family member Mail: Make-A-Wish New Zealand. PO Box 8029, Symonds St, Auckland 1150 Social worker / Case worker Website Social media Ph: 0800 80 70 80

If there are additional people, please provide details on a separate piece of paper.

Other Wish Family

Other (please state)