



Wish Application Form

For your wish to be considered please complete this application form accurately and in full. The form must be completed by the child's parent or legal guardian.

Child's Name: _____ M F Prefer Not to Say

Date of Birth: _____ Age: _____

Address: _____

Postcode: _____

Name of Parent/Guardian: _____

Relationship to the child: _____

Telephone No. Home: _____ Mobile: _____

Email address: _____

Child's Illness: _____ Date of Diagnosis: _____

Child's Hospital: _____

Where did you hear about us? _____

What is your wish?

Please provide a description of how this would help:

Have you received a wish previously from Molly Olly's Wishes or any other organisation? Yes / No
If yes, please give details (including name of organisation and when wish was granted):



Molly Olly's Wishes Therapeutic Aids

Are you aware of the therapeutic Olly The Brave toy and books that the Charity offers? If yes, how did you hear about them? If no, please see details below and request if required.

Olly the Brave is a soft toy lion with a central line and a detachable mane. The books aim to support children, their families and friends, to help them understand their experiences, and provide many opportunities for feelings to be explored and shared.

We supply the therapeutic toy and books free of charge so if you do not already have an Olly The Brave Lion or books, please tick the relevant boxes below and we will send them to you via the post. Please be aware that Books 5 and 6 are for end of life and bereavement.

We understand that not all books will be relevant at the same time. You do not need to order them all together and can contact us at any time to request the appropriate book for your situation.

Olly The Brave Toy Lion	<input type="checkbox"/>	Soft toy lion with a central line and a detachable mane.
Book 1: Olly The Brave and The Wigglys	<input type="checkbox"/>	Olly becomes unwell, is diagnosed, has a central line fitted and prepares for treatment.
Book 2: Olly being Brave and Chemotherapy and two coloured manes	<input type="checkbox"/>	Olly shares his side effects and feelings whilst having chemotherapy treatment. The coloured manes are provided to help support children through hair loss.
Book 3: Olly Back at School and the Wiggly Wobbly Tummy	<input type="checkbox"/>	Returning to School after a period in hospital and how things can feel different after being poorly.
Book 4: For brothers and sisters – Ben's big stuff	<input type="checkbox"/>	Olly's brother Ben shares his worries and feelings – a story for siblings and friends of someone who needs a lot of care.
PLEASE NOTE: THE LATEST TWO BOOKS IN OUR SERIES 5 & 6 ARE OF A SENSITIVE NATURE.		If you have ordered these books, then it is important that we draw your attention to the contents so that you can consider and decide the best and most suitable approach for your child.
Book 5: Beginnings and Endings – Nights of Cuddles	<input type="checkbox"/>	Olly is home and there is no more treatment. This book talks about beginnings and endings in life, feelings and worries.
Book 6: The colours of the day – Finding life after Olly	<input type="checkbox"/>	Support children and their family and friends to talk about loss and make space for feelings and worries.



Newsletter

We would like to send you information about the Charity and its activities by email. If you agree to being contacted in this way, please tick the box below:

Please note that you can withdraw your consent to being contacted at a later date if you choose to do so by contacting Molly Olly's Wishes.

Use of Photographs

To raise awareness of the Charity, Molly Olly's Wishes also occasionally shares stories about wishes that we have granted. This may involve the use of photographs, video footage and supply of brief details for promotional use, and may involve using your child's picture on our website to illustrate to donors how their money has been used to help your child. We will not use full names or contact details under any circumstances.

If you are happy for Molly Olly's Wishes to share your story, please provide your specific consent below. Please note that you can withdraw your consent to publicity at a later date if you choose to do so by contacting Molly Olly's Wishes.

I _____ (PLEASE PRINT YOUR NAME)

hereby give my consent for Molly Olly's Wishes to use photographs and/or video footage and brief details for promotional use.

Parent/Guardian's Signature: _____ Date: _____

Your Information

Molly Olly's Wishes collects personal information when you submit a Wish application. We will use this information (i) to ensure the application meets the Charity's criteria for granting Wishes and (ii) to fulfill the Wish. Molly Olly's Wishes will not share your information with any business outside the Charity for marketing purposes.

I hereby confirm that to the best of my knowledge the information regarding the child named in this form is correct and give my consent for Molly Olly's Wishes to use this information to fulfill this Wish.

Parent/Guardians signature: _____ Date: _____



Health Professional Endorsement

The following section must be completed by a health professional who has been involved in the care of your child. We kindly request that health professionals to try to ensure that all the wishes are age appropriate and meet Molly Olly's Wishes criteria. Where a request has also been made for any of the Olly the Brave books, we ask that health professionals check that the book subject is relevant the circumstances of the child.

I _____ (PLEASE PRINT YOUR NAME)

know the above named child and confirm to the best of my knowledge the details provided are correct.

Health Professional Signature _____

Hospital or Organisation _____

Job Description _____

Daytime telephone number _____

Email Address _____

Please Note:

1. Molly Olly's Wishes criteria for granting wishes are:
 - a. For children and young people aged 0 to 18
 - b. For children and young people living in the UK
 - c. For children and young people who have a life-threatening illness or condition
 - d. We normally grant only one wish per individual
 - e. We concentrate on wishes that will support emotional well-being
 - f. We do not normally grant wishes for overseas travel, for activities that the relevant health professionals consider are inappropriate, or for matters which would create an on-going responsibility or commitment for the Charity.
2. Where a wish request meets our criteria and is recommended by the relevant health professionals, we will do our utmost to grant the wish as quickly as possible, provided that the item requested is available.
3. Where wishes involve the purchase of a product the Charity is unable to repair or replace the product if it subsequently becomes broken or lost.
4. If you apply for a wish, Molly Olly's Wishes will hold the information you provide for a maximum of 5 years after the date the wish has been fulfilled.

Please return your completed form to:

Wish Applications

Molly Olly's Wishes

First Floor Offices,

1 Swan Street,

Warwick, CV34 4BJ

For further information please contact:

Molly Olly Wishes Office: 01926 698735

Rachel: rachel@mollyolly.co.uk 07747 854914

Jackie: jackie@mollyolly.co.uk 07966 373459