Wish Recipient: _____________________________________

Wish Description: ________________________________________________
___________________________________________________________________________________

Date wish was granted: ______________________

Please answer the following questions:

1. Has having your Twilight Wish granted impacted your life positively?
   □ Yes
   Please explain: ________________________________________________
   _____________________________________________________________
   _____________________________________________________________
   □ No

2. Has your quality of life improved since receiving your wish or celebration event?
   □ Yes
   □ No

3. Did having your wish granted impact your ability to be self-sufficient?
   □ Yes
   Please explain: ________________________________________________
   _____________________________________________________________
   _____________________________________________________________
   □ No
4. How did your actual wish fulfillment compare with your expectations?
   □ Better
   □ The Same
   □ Worse
   Please explain why:_____________________________________________________
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

5. Did your wish granting make you feel cared for, thanked, and respected?
   □ Yes
   □ No

6. A. Please describe your best/favorite memory of the whole experience:
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

   B. How could we have improved your experience?
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

Thank you for taking the time to answer these questions.
Kindly return to
Twilight Wish Foundation at P.O. Box 1042 Doylestown, PA 18901