



## SINGLE PARENT FORM

I, \_\_\_\_\_, father/mother of \_\_\_\_\_,  
("Child"), hereby represent to the Make-A-Wish Foundation® that:

1. I have been awarded custody of my Child and have been informed by legal counsel and/or the court that I have the legal right to make important decisions involving my Child, like this one, without the need to consult with, or to obtain approval from, his/her other biological parent;
2. I understand that, for legal and other reasons, the Make-A-Wish Foundation generally requires all individuals with parental or custodial rights for a child to approve the child's wish, or participation in a wish, and to sign various documents including a Liability Release and Authorization Re: Medical Information and Publicity form (the "Release and Authorization");
3. Based on concerns for my Child's well being, I have asked the Make-A-Wish Foundation to make an exception in this case and to grant my Child's wish, or allow my Child to participate in a wish, without the approval of his/her other biological parent, \_\_\_\_\_, who does not take an active part in my Child's upbringing;
4. In light of the above circumstances, I take full responsibility for signing the Release and Authorization and other documents so that my Child may have his/her wish granted, or be allowed to participate in a wish, and I indemnify and hold the Make-A-Wish Foundation harmless for, from and against any adverse consequences that may result from my signing the documents alone.
5. I also agree to notify the Make-A-Wish Foundation promptly if, prior to the completion of the wish, my custody status changes or I learn that Child's other biological parent has taken legal steps to have the custody arrangement modified or rescinded.

I declare under penalties of perjury that the information set forth herein is true, accurate and complete to the best of my knowledge and belief.

\_\_\_\_\_  
[Date]

\_\_\_\_\_  
[Parent's signature]