



# WRAP-UP FORM

Fundraiser Name: \_\_\_\_\_ Date Held: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Total Raised: \$ \_\_\_\_\_

Please list all the ways your fundraiser earned money, specifying the amount received through each avenue separately (example: bake sale - \$1,000/car wash - \$500, etc.):

\_\_\_\_\_  
\_\_\_\_\_

Did you receive support from the Make-A-Wish® staff?  Y  N

Was there anything that they could have done differently (or more of) to ensure your success?

\_\_\_\_\_

Would you like to participate in the Kids For Wish Kids® program next year?  Y  N

If no, why not? \_\_\_\_\_

Will you be the contact for next year's event?  Y  N

If no, please provide the appropriate contact person's name, email and phone number:

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Within 30 days of your fundraiser, please mail this sheet and the funds to:

**Make-A-Wish® Wisconsin**  
11020 W. Plank Court, Suite 200  
Wauwatosa, WI 53226

Please do not mail cash; drop off at the Make-A-Wish office.

