



## CARD PARTY HOST SUBMISSION FORM

PLEASE COMPLETE AND SEND THIS FORM WITH  
YOUR CARDS TO THE FORGOTTEN WISHES FOUNDATION  
Mail the completed cards to Forgotten Wishes Foundation  
4321 Kingwood Dr. #58, Kingwood, TX 77339

Organizations Name: \_\_\_\_\_

Date: \_\_\_\_\_

### Card Party Host

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

### Who Else Should We Recognize

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Additional Notes: \_\_\_\_\_

### Card Party Details

How Many Cards Were Made? \_\_\_\_\_ How Many People Participated? \_\_\_\_\_  
What Kind of Event Did You Have?  In-person  Virtual  Card Station  Other:

### What Would You Share With Others About Your Experience and Hosting a Card Party?

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