

ART OF WISHES

Dear Friends,

On behalf of Make-A-Wish Orange County and the Inland Empire, we are thrilled to share details about our upcoming Wish Gala, taking place on **Saturday, October 17, 2026**, at the beautiful Pendry Hotel in Newport Beach.

This inspiring evening brings together generous supporters, community leaders, and wish families to raise vital funds that help us grant life-changing wishes to children with critical illnesses in our local community. Last year alone, thanks to compassionate partners like you, we were able to grant hundreds of wishes, and we aim to do even more this year.

We are currently seeking auction donations to help make this event a success. Your donation, whether it's a product, gift certificate, experience, or service, will be featured in our silent auction and recognized in our event materials. Most importantly, your support will directly help create joy and hope for children who need it most.

All donors will be acknowledged in the event program, on-site signage, and on our social media platforms as a valued contributor to our mission. This is a wonderful opportunity to showcase your brand and demonstrate your commitment to giving back to the local community.

If you're interested in contributing, please return the attached donation form by September 14, 2026. Should you have any questions, feel free to contact us at amedrano@ocie.wish.org or 714-573-9474.

Together, we can create life-changing moments and unforgettable memories for children who need them most.

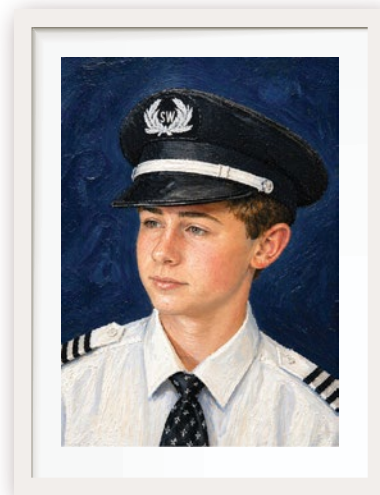
Thank you for your generosity and support of Make-A-Wish Orange County and the Inland Empire.

Deb Foster

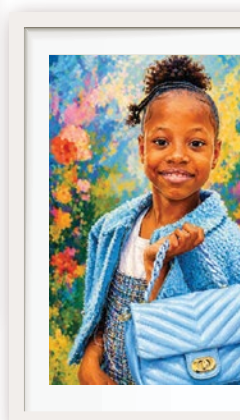
Deb Foster
The Wish Gala Auction Chair



Scan for more Information
www.wishgala.org



Ewan, 16
"I wish to be a pilot!"
Santa Ana, CA leukemia



Princess, 10
"I wish to have a shopping spree!"
San Bernardino, CA blood disorder

Auction Donation Form

Please complete this form and mail or email by **September 14, 2026** to the address below.

Contact Information

Contact Name _____

Company/Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

How would you like your name (or company name) listed on auction materials? _____

Contributed Item(s)

Please give a detailed description of the item(s) being contributed.

List any restrictions, deadlines, expiration and/or blackout dates.

Item and Estimated Value _____

Please Check

- Item(s) are included with this form Item(s) will be delivered on _____ Please create certificate
 Item(s) need to be picked up

Pick-up Contact Name _____

Pick-up Address/Location _____

Phone _____ Email _____

Solicitor _____