





DONATE ORGANS-SAVE LIVES.

अंगदान - जीवनदान...

For Organs / Tissue Pledging

(TO BE FILLED BY INDIVIDUAL OF AGE 18 YEARS OR ABOVE)

FILL FORM IN CAPITAL LETTERS ONLY

Registration Number (To be allotted by Organ Donor Registry)
First Name Last Name Last Name
AgedDate of Birth
in the presence of persons mentioned below hereby unequivocally authorise the removal of following organ(s) and /or tissue(s), from my body after being declared brain stem dead by the board of medical experts and consent to donate the same for therapeutic purposes.
Please Tick as Applicable
Organ(s): Heart 🗌 Lungs 🔲 Kidneys 🔲 Liver 🔝 Pancreas 🗀 Intestine 🗀 / All 🔲
Tissue(s): Corneas/Eye Balls □ Skin □ Bones □ Heart Valves □ Blood Vessels □ / All □
(Tissues can also be donated after Brain Stem Death as well as Cardiac Death)
My blood group is (if Known) : Signature of Pledger :
Address for correspondence :
State:Email:
Name of Relatives
First Name Last Name Last Name
Aged Gender : Male Female Address
Taluka : Dist. :
State : Email : Email :
is a near relative to the donor as
Dated :
Note:
 Organ Donation is a family decision. So, it is important that you discuss your decision with family members and loved ones so that it will be easier for them to follow through with your wishes.

- 2. The person making the pledge has the option to withdraw the pledge.
- 3. After filling the form, Kindly send it to Donate Life, on address mentioned below.

"Donate Life"

Opp. IDBI Bank, Nr. Kasanagar, Katargam, Surat-395 004. Gujarat, India. Phone No. : +91-75730 11101/03/06/07

M: info@donatelife.org.in | 88: www.donatelife.org.in

Donate Life Trust: 🔞 🔾 Download Donate Life Trust Mobile App : 📦 🛮 🔞 IOS

Toll Free Number: 1800 233 1944