

US Organ Donor Card

NOTIFY		Relationship
Address	-----	

E-mail	-----	

My medical background		
Blood Group & Rhesus Factor	-----	

Donor: _____ Witness: _____ Witness: _____ Date: _____ Signature: _____		
I wish to donate my organs and tissues. I wish to give: <input type="checkbox"/> Any needed organs and tissues <input type="checkbox"/> Only the following organs and tissues: _____		



	I wish to donate my organs and tissues. I wish to give: <input type="checkbox"/> Any needed organs and tissues <input type="checkbox"/> Only the following organs and tissues: _____	
	Donor: _____ Witness: _____ Witness: _____ Date: _____ Signature: _____	
My medical background		
Blood Group & Rhesus Factor	-----	

Donor: _____ Witness: _____ Witness: _____ Date: _____ Signature: _____		
I wish to donate my organs and tissues. I wish to give: <input type="checkbox"/> Any needed organs and tissues <input type="checkbox"/> Only the following organs and tissues: _____		

Instructions

1. Cut the card, fold it (see the blue arrow) then paste the two blank faces together.
2. You can recover the card with transparent self-adhesive paper, like the one for the school books.
3. Make one for every member of your family.

NOTIFY		Relationship
Address	-----	

E-mail	-----	

My medical background		
Blood Group & Rhesus Factor	-----	

Donor: _____ Witness: _____ Witness: _____ Date: _____ Signature: _____		
I wish to donate my organs and tissues. I wish to give: <input type="checkbox"/> Any needed organs and tissues <input type="checkbox"/> Only the following organs and tissues: _____		

