Date of Birth of Donor

This is a legal document under the Anatomical Gift Act or similar laws. □ Yes, I have discussed my wishes with my family.

For further information, consult your physician or the NKF.

Witness

City and State

**NOITAGNUOT YENDIX JANOITAN FROM THE** DONOB CARD THIS IS YOUR

Signed by the donor and the following two witnesses in the presence of each other:

Here's all you have to do...

- and sign it in front of two witnesses. J. Designate your wishes by filling out the card,
- them the top half of the card. 2. Discuss your wishes with your family and give
- 3. Carry the bottom half of the card in your wallet.
- 4. Tell someone else about organ and tissue donation.

# **DONATE LIFE**

Date Signed

Witness

National Kidney Foundation<sup>-</sup>

Signature of Donor

## FAMILY NOTIFICATION CARD

This is to inform you that, should the occasion ever arise, I would like to be an organ and tissue donor. Please see that my wishes are carried out by informing the attending medical personnel that I have indicated my wishes to become a donor. Thank you.

Signature of Donor

Date Signed

### Contact us for further information:



800.622.9010 www.kidney.org

## **ORGAN AND TISSUE DONOR CARD**

#### Print or type name of donor

In the hope that I may help others, I hereby make this anatomical gift, if medically acceptable, to take effect upon my death. My wishes are indicated below.

I give:

any needed organs or tissues
only the following organs or tissues

Specify the organ(s), tissue(s)

for the purposes of transplantation, therapy, medical research or education;

my body for anatomical study if needed.

Limitations or special wishes, if any: