

DONATE LIFE ORGAN & TISSUE DONATION

Your decision to become an organ donor is an act of courage and caring. It is a decision that can one day mean saving or improving someone else's life. Organ and tissue donation for transplant is a gift of life after death.

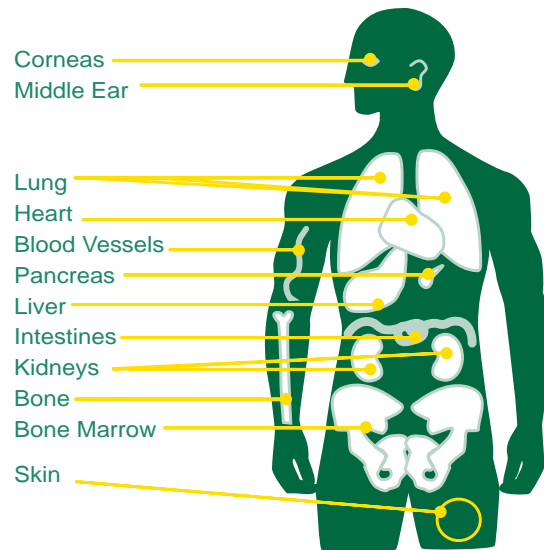
Thousands of people are alive today because caring individuals like you have indicated their wishes to be an organ donor and shared their decision with their family.

Indicate your wishes to be an organ/tissue donor by completing the attached donor card in the presence of two witnesses, preferably family members, and carry your donor card with you at all times. Then discuss your decision with your family, sign the attached family notification card, and give to your closest relative.

Remember, your family must give consent before organ/tissue donation can occur.



1-800-232-2892



FACTS ABOUT DONATION

- Donation is only considered after all efforts to save your life have been made, brain death has been declared, and your family has been consulted.
- Anyone can be a potential donor regardless of your age, race, or medical history.
- Most religions support donation viewing it as a final act of love and generosity toward others.
- An open casket funeral for an organ/tissue donor is possible because through the entire process, the body is treated with care, respect, and dignity.

ORGAN/TISSUE DONOR CARD

of _____
Print or type name of donor

In the hope that I may help others, I pledge this gift to take effect upon my death. My wishes are indicated below.

I give: (a) any needed organs/tissues
 (b) only the following organs/tissue

Specify organs/tissues

ALWAYS CARRY THIS CARD WITH YOU

FAMILY NOTIFICATION CARD

This is to inform you that I want to be an organ and tissue donor if the occasion arises. Please see that my wishes are carried out by informing the appropriate medical professional that I want to be a donor.

THANK YOU _____
Signature of donor

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

Signature

Signature of Witness #1 / Relationship to Donor

Signature of Witness #2 / Relationship to Donor

Date Signed

Date of Birth of Donor

City/State or Island

Country

PLEASE DETACH AND GIVE THIS PORTION OF THE CARD TO YOUR FAMILY

Please sign the statement on the other side of this portion of the card. Detach the card at the perforations and give it to the person (generally your next-of-kin) most likely to be notified if you become involved in a medical emergency.