FORM 7

FOR ORGAN OR TISSUE PLEDGING

(To be filled by individual of age 18 year or above)

[Refer rule 5(4)(a)]

ORGAN(S) AND TISSUE(S) DONOR FORM

(To be filled in triplicate)

Registration Number (To be allotted by Organ Donor Registry)....

lease tick as applicable	in the second se
	(Following tissues can also be donated after brain stem death as well as cardiac death)
Heart	Corneas/Eye Balls
Lungs	Skin
Kidneys	Bones
Liver	Heart Valves
Pancreas	Blood Vessels
Any Other Organ (Pl. specify)	Any other Tissue (Pl. specify)
All Organs	All Tissues
My blood group is (if known)	
	Signature of Pledger
	Address for correspondence
	Telephone No.
	Email:
	Dated:
	the pledge will be retained by pledger, one by the institution where pledge is made
ignature of Witness 1) 1. Shri/Smt./Km	to the nodal networking organisation.) S/o,D/o,W/oagedreside Telephone No
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(ii) One copy of the pledge form/pledge card to be with respective networking organisation, one copy to be retained by institution where the

pledge is made and one copy to be handed over to the pledger.

(iii) The person making the pledge has the option to withdraw the pledge.