

P.O. Box 1646
Castle Rock, Colorado 80104
720-733-0184
Toll Free 1-877-745-3447
info@donatedeggs.com

Donor Number: 0320 (For Agency Use Only)

Today's Date: 10/15/10

Date of Birth: 07/09/1982

How did you hear of An Eggceptional Match? (If website, pls. specify): Google & Previous Donor

I am interested in an () Open () Anonymous () Semi-Open-Donation **(X) No Preference**

Full Legal Name and any aliases: _____

Social Security #: *** will email or call separately Insurance Co: _____

Address: _____ City: Ellensburg State: WA Zip: _____

Home Phone: _____ Same as Cell _____ Work Phone: _____ Same _____

Cell Phone: _____ May we leave a voicemail message at: ***Cell*, yes, anytime of day/night**

Are email communications permissible? If so, what is your E-mail Address: _____

I check my email: **several times a week**

Are text messages permissible and if so at what telephone numbers? Yes, cell phone

Are you currently listed with any other clinics or agencies? No If yes, whom? N/A

Have you signed a contract with any other clinic or agency? No If so, please provide a complete copy to me.

Have you ever been denied entry into another egg donor program? No If yes, please explain in detail: N/A

How soon are you able to begin your donation? Now

Who may we contact in case of an emergency? _____

Relationship Friend, Will relay msg's to appropriate people as needed

Who may we contact in case your demographics change? _____

Are you (Pls. Circle): Single with relationship

Are you a U.S. Citizen? Yes

Do you have medical insurance? Yes

If so, provide name of your health plan and identification number: _____

Are you willing to travel for an egg donation? Yes Possibly if: Expenses Covered

Do you have any lawsuits or other legal claims pending against you? No

Have you ever filed bankruptcy? No

Have you ever been convicted of a crime? No If yes, please provide details including date, name of criminal offense, date of conviction, location, etc.: N/A

PHYSICAL CHARACTERISTICS

Age: 29 Height: 5'8" Weight: 135 Measurements: Bust 34B Hips 35 Waist 28

Race: Caucasian

Ethnicity: (Pls. Be specific, ie...German, French, Irish, etc...) Czech, German, Scottish, British

Mother's Side: Czech, Scottish

Father's Side: German, Scottish, British

Blood Type: A+ Place of Birth: Bremerton WA

What celebrity do people most commonly say you look like? Elisha Cuthbert, Angelina Jolie, Alanis Morissette

***Once you are chosen as an egg donor, first morning appointments are mandatory. You are not able to choose the dates of your appointments, as they will coincide with the clinic's requirements and timing of your cycle. You will be required to attend 7-10 monitoring appointments prior to the actual egg retrieval. Most clinics are open between 7:30-8:00 a.m. If your schedule cannot accommodate this criterion, you will not qualify for the egg donation process**

PLEASE CIRCLE (OR HIGHLIGHT) APPROPRIATE RESPONSE

Body Type/Bone Structure: small

Hands: right-handed

Eyes: *Color hazel
*Set average
*Size average
*Shape almond
*Shade medium

Hair: *Natural Color brown
*Color as child brown
*Shade dark
*Type straight
*Fullness thick
*Texture fine

Nose: *Size medium
*Width average
*length average
*Nostril Flare average

Cheekbones: *Set high
*Prominence medium

Mouth: *Size average
*Lips thin

Chin: *Shape round
*Prominence average
*Cleft none

Skin: *Tone light & olive
*Tan Ability medium
*Condition normal
*Acne none at what age_n/a_

Other Facial Features: *Moles none
*Freckles none in winter, several light ones in summer
*Dimples medium

Eyesight: *Vision normal
*Glasses none
*Astigmatism no

Dental: *Device braces
*Reason cosmetic
*Age during use _12_ to _15____years of age

REPRODUCTIVE HISTORY

Age at first period? 14 Are your cycle's regular? yes

How long are your cycles from day one to the next day one? 28-30 How long do they last? 4 days

Do you experience cramps? Mild

Method of birth control? Spermicide If none, in the past? Yaz (Pills)-

Have you ever been pregnant? No If yes, did you have trouble conceiving? n/a

Have you ever been treated for infertility? No

Did your mother take DES while she was pregnant with you? No

LIST OF PREGNANCIES AND OUTCOMES

Year	Delivery ♀ or ♂ Section/Vag	Miscarriage	Ectopic	Blighted Ovum	Termination
1.	n/a				
2.					
3.					
4.					
5.					
6.					

Any complications? n/a

DONATION HISTORY

Have you ever donated your eggs before? Yes If yes, Please list dates and outcomes:

Mo/Year	# Eggs Retrieved	# Eggs Fertilized	Did a pregnancy occur?	Did a live birth occur?
06/06	11	6	Yes	Yes-Boy

Were their embryos left to cryopreserve (freeze)? No If yes, approximately how many per cycle? _____

What is the compensation you are asking for your donation? 6,500-7,000 (2nd donation- if 3rd ask)

What is the least amount you would consider? negotiable

Will you require missed wages from work? Depends on whether I'm in school or on a break (full time vs. part time)

If yes, what is your hourly wage? aprox \$15 if broken down that way (bid by project)

How many hours per week do you work? 15-30

Will you require childcare reimbursement? Cat care/boarding If yes, what is the hourly rate? I think it's 15 or 17 per day, (per cat) and it's 3 cats. I could look around for a sitter that might be cheaper but I've had very bad luck so far (re: house trashed, items stolen, etc on different occasions by diff. people recommended)

During travel assignments, will you: () Drive yourself to the airport and require parking reimbursement
(X) Take a taxi or shuttle and require reimbursement
() Have someone drop you off and require NO reimbursement

Will you require high speed internet access in your hotel to keep up with work or school? Yes

MEDICAL HISTORY

Have you ever had any surgeries? If so please list type and date:

1. Wisdom Teeth Removed 1994

2. Egg Donation 2006

Have you had a blood transfusion in the last 12 months? no

If yes, please list date and reason: n/a

Any hospitalizations not mentioned above? no If yes, please explain: _____

Have you been exposed to radiation or toxic chemicals in your work or personal life? _no_

Have you ever had a reaction to anesthesia? _no_ If yes, please explain reaction in detail: _____

*Do you smoke cigarettes? _no_ Packs per day? _____ # of years _____ # of years quit _____

Do you now or have you ever taken recreational drugs? _never_ If so, What? _____

Do you drink alcohol? _no_ If yes, how many drinks per: day? _____ week? _____ month? _____

Do you have any allergies to drugs or environmental exposures? _no_ Pls. explain: _____

Describe any childhood allergies that you have outgrown: _none_

Do you have any medical illnesses (diabetes, asthma, etc...)? _no_ If yes, pls. explain: _____

Do you have frequent nose bleeds, bleeding gums while brushing your teeth and or clots with menstrual periods?

No

Have you been sexually active in the past 6 months? _Yes_

Are you currently sexually active? _Yes_ If yes, is it a monogamous relationship? _Yes_ If yes, for how long? 4 yrs

If no, will your partner consent to standard blood testing? _n/a_

Have you or your partner ever had a sexually transmitted disease (trichomonias, chlamydia, syphilis, condyloma, gonorrhea, herpes)? No

If yes, when and what was your treatment regimen? n/a

Have you ever been diagnosed with any gynecological problems such as endometriosis, ovarian cysts, abnormal Pap smears, fibroids, polyps? No If yes, please explain treatment n/a

Please list all prescription or over the counter medications including dosage you are currently taking: Multi-vitamin, Omega 3 supplement

***To become an egg donor, you must be completely drug free. You must also be nicotine free for at least 6 mos. You may be tested for this substance at any time.**

EDUCATION

Highest Level of Education Completed:

Sr. High School (GPA: 3.6)

Currently in College pursuing a degree in: Anthropology & Museum Studies

Completed College with degree in: Associates, General

Currently pursuing advanced degree in: Start Next yr, Anthropology

Completed advance degree in:

Vocational/Trade School: Some in Photography

Test Scores: SAT/ACT never took GRE: About to take College GPA: 3.0 + extracurricular activities and work

Please list names and year of all colleges attended:

College

Year

1. Skagit Valley College 2003-2005

2. Cental Washington University 2007-Current

What was your favorite subject in school? Science, Art, Psychology, Spanish You're least favorite? Math

Dean's List or Honor Roll? Deans List Summer 2010 GPA was 3.8 for intensive Spanish 15 cr. class in 9 weeks (equivalent to 1 year Spanish classes). Spoke at community college commencement (graduation) ceremony. Right now I hold an officer position in the Anthropology Club (Senator) and in Community College I was Vice- President of the Student Government (All responsibilities of president at the campus I was at- not the main campus where the Pres. was)

As an adult I am most proud of: My ability to adapt to new situations and make friends with just about anyone.

Currently I have a career in: Photojournalism

I have been in this profession for 10 years

*I have flexibility in my current profession: Yes

Languages: Speak: Spanish – not confident about speaking, but can orally comprehend a great deal

Read: Spanish

Write: Spanish

I consider myself: Average

Physical activities include: Running, jogging, ridding bikes

Have you excelled in any physical activities? Track, Middle School 1st and 2nd place in District Meets

Manual Dexterity: Average

I would describe my diet as: I try to eat organic. I do eat meat but I do not eat fast food.

Other skills or talents? I sequence DNA at school for anthropological research. teaching, love of the arts, working with animals.

Do you show artistic or musical ability? yes If yes please explain: Taught photography by father and have been doing it all my life! Won numerous awards. Taught self to play piano beginning at age 7 continued to age 10. Taught self to play guitar age 12-14.

FAMILY HEALTH HISTORY

	Eye Color	Hair Color	Height Weight	Complexion	Age If Living	Age at Death	Cause of Death
Mother	Blue	Light Brown	120/5'7	Fair		33	Car Accident
Father	Brown	Dark Brown	6'1"/150	Olive	64		
(Half) Brother: 1. On father's side.	Brown	Light Brown	6'2"/160	Fair	39		
2.							
3.							
4.							
Sister: 1.	Blue	Light Brown	5'8"/120 same bust/waist/hips as me	Fair	33		
2.							
3.							
4.							
Maternal Grandmother	Brown	Brown	5'7"/120	Med	91		
Maternal Grandfather	Brown	Brown	5'9"/190	Med		75	Pneumonia
Paternal Grandmother	Brown	Blue	5'6"/190	Very Fair/light	91		
Paternal Grandfather	Brown	Brown	6'2"/170	Med	93		
Children: (If Any) 1.	N/A						

Are you adopted? no If yes, do you have access to your biological health history? _____
 Twins or multiple births in the family? no If yes, how many sets? _____

Are there any known genetic diseases that run in your family? ____ If yes, please identify all such diseases and explain in as much detail as possible: Eye condition affecting my grandma (Paternal). She was 100% normal until her mid 70's her eyesight started going and now within the last two years (in her 90's). Otherwise we are a luckily healthy bunch that live a long time. My Paternal Great-Grandfather was 104 when he passed away, he was in great health even though he drank coffee and ate an egg every single morning!!!

Has anyone in your family been born with a birth defect? _No_ If yes, please explain in detail: _____

Have you had a brother or sister die in infancy or early childhood? _No_____ If yes, please explain the cause of death: _____

Have you ever been tested for:

Cystic Fibrosis (Caucasian) **Possibly with first egg donation**

Sickle Cell (African American) _____

Thalassemia (Greek/Italian) _____

Tay-Sach's (Jewish) _____

Fragile X _____

Spinal Muscular Atrophy _____

If yes to any of the above, were you determined a carrier? ?

How would you describe your personality and temperament? Intelligent, social, curious, thoughtful, kind, calm, adventurous, motivated.

What is your philosophy of life? To achieve empathy with all people and things and to obtain the deepest understanding of the human condition.

What qualities and characteristics would you hope the recipient parents possess? Patience, kindness, calmness, empathy

How does it make you feel at the possibility of their offspring knowing about the donation? I would wonder if the child would feel ok about it, as it is not the "norm" I suppose. I would not mind if the parents told the child and the child sought me out to ask questions at appropriate ages. I would answer as best I could if that situation ever occurred.

How would you describe your childhood? joyful, artistic, playful, bright, full of play and imagination.

What is the earliest memory you hold as a child? Being fascinated by my mother's hair and pulling at it as an infant (father says this would have put me at about 1 years of age due to the description of the house).

What was it like growing up in your family? Lonely. My sister was older and went off to college early, at 16 when I was 11. I wanted more siblings! I really like dating someone with a large family (14 aunts/uncles not including in-laws and step-family!!! Love it!!!)

What religion did you belong to as a child? My mother used to take me to a United Methodist Church, later my father and grandparents took me to Lutheran churches.

When I Was A Child:

My favorite thing to do was: play pretend games (role-play), climb trees, swing, draw, read

At home I was expected to: dry dishes, clean bathroom, clean room, vacuum, fold family clothes, sweep & mop house

My parents were strict about: TV use, going outside of the yard, bedtime, making messes

My parents taught me to value: time with my grandparents

What I loved most about my father was: he seemed to know how to fix everything! (even though he doesn't)

What I loved most about my mother was: She was so committed to early childhood education in-home

My favorite relatives were: my sister and my paternal grandfather.

I loved to visit: Warm, sunny places. The ocean. Beaches

In comparison to others I was: Very imaginative and curious

Your Teenage Years:

Describe yourself as a teenager: Deeply thoughtful and observant. Development of artistic abilities. Some shyness.

Describe your achievements: Photography and Track awards.

Did you do poorly at anything? I didn't ask for help when I needed a tutor for math. I did ok, but I wish I had done better.

Did you have any problems as a teenager (e.g., health, acne, social, educational, etc.)? No, I was healthy, I've never had acne problems, I had some shyness but I had tons of friends... I guess public speaking was the cause; obviously I have no problem now (in college) with public speaking. In school I did pretty well. I was never in trouble.

What do you hope to achieve by volunteering in an egg donor program? I hope I can help someone reach their goal of having kids.

What message would you like passed on to the recipient of your eggs/their offspring? Please take care of this precious gift. He/she deserves the best you can give!

What helped you decide to become an egg donor? After hearing all these personal stories from IP's, I got a deep sense of how much I could help someone. Then I donated to the nicest lady I have ever met, and she & her husband had a son. When I think about it, I think it is perhaps the best/most amazing thing I have ever done in my life. I decided I really liked donating even though I have only done it once.

Do you consider yourself a reliable person? yes, others are relying on me

Do you consider yourself a punctual person? yes, I know how annoying and unprofessional it is when others are late

Would you describe yourself as a religious or spiritual person? Very spiritual, in my own way. I don't have a "religion" per se, but I believe in something that cannot be put into words. I know in my heart what it means to be true and just. I definitely feel God in everything around me.

Do you have any ethical, moral or religious reservations about being an egg donor? I worry that if a child is conceived and born it will be abused in any number of ways by the parent(s) or others.

What are your personal goals? Have you achieved any of these goals? I already successfully started and run a photography business. I went back to school to get a BA in Anthropology. I graduate Spring of 2010. I am applying to graduate school. I like school and research, I plan to continue to a PhD and become a professor at a major University.

What do you see yourself doing in the next 5-10 years? I will be pursuing a graduate degree and most likely a PhD, then teaching and a University.

What would you like your recipient couple to know about you that has not already been asked? Feel free to ask any questions. I am very open.

What is your favorite color? purple

Favorite type of food? Thai

Favorite movie? Empire of the Sun, All Things Are Illuminated, Ameile

Favorite type of music? Classic Rock (oldies, 60s, 70s), classical piano, 80's pop

Favorite Book? Civilizing Rituals, Carol Duncan (For a class I had/ museum studies)

Would you be willing to donate to gay or single prospective parents? Yes, either Please specify: Committed to equal rights, and also just because the "right person" isn't around shouldn't stop a single parent from starting their journey to parenthood.

Would you be willing to meet a child conceived as the result of your donation? Oh yes! Please elaborate: I would be excited to meet her/him. However, I would want the parents to be OK with something like that. Mainly I would be curious to see its personality traits.

Would you be interested in possibly meeting the prospective parents or are you OK with them knowing your first name? Of course! And I don't mind at all.

What are your beliefs concerning selective reduction or aborting a fetus due to an anomaly(s) (birth defect)?

I don't have a problem with it.

How do you feel about the possibility of any remaining embryos being donated to another infertile couple that cannot afford the cost of infertility treatment? Will you sign a consent permitting such donation?

I would want to know if another donation happened, I would appreciate knowing if a child was born too. Regardless, I would sign consent.

How do you feel about any remaining embryos being discarded or donated to scientific research? Will you sign a consent permitting such medical or scientific research or destruction of such remaining embryos?

Yes, I would consent. I would be so curious to know what the research was, because of what I do with DNA. But that's not really for me to know I suppose.

Some clinics have their Prospective Parents sign away rights to any left over embryos to be used at the clinic's discretion, how do you feel about not knowing the outcome of their decision?

I'm uneasy not knowing outcomes, but there's nothing I can do about it.

What are your thoughts on the possibility of this couple using a gestational carrier (surrogate) or a qualified sperm donor?

Surrogates and sperm donors are wonderful people.

Is there a message you would like to leave for your prospective parents? Please take care of this precious gift. It is an immense thing for me to donate. He/she deserves the best you can give. I know I will think about donation through-out my life. I already donated once and it was the most amazing experience for me and I am so happy for the couple. I would appreciate an update/photo through the agency once and awhile but understand if that is not something of interest to you. May you have an amazing journey. My thoughts will be with you, always.

My Paternal Great-Grandfather was 104 when he passed away, he was in great health. My living grandparents are: age 91 (both grandmas), and 93 (paternal grandpa- and he still passed his driving skills test at 92. He's amazing)

Please read the list of medical problems carefully and indicate your answer in the appropriate box. Remember, this is the only information that your intended parents have to make a healthy and intuitive choice for their offspring.

HEART	You	Mother	Father	Siblings	Grandparents	Other Family	Explain
A. Stroke							
B. heart attack							
C. heart disease							
1. from birth							
2. lifestyle							
D. hardening of the arteries							
E. high blood pressure							
BLOOD							
A. anemia							
B. sickle-cell anemia							
C. hemophilia or other bleeding problem							
D. leukemia							
E. Immune Deficiency							
F. other blood disorder							
RESPIRATORY (LUNGS)							
A. hay fever							
B. asthma							
C. emphysema							
D. tuberculosis							
E. lung cancer							
F. pneumonia					X		Maternal Grandpa
G. other lung disease							
GASTRO-INTESTINAL							
A. ulcer of stomach or duodenum							
B. gall stones							
C. hepatitis A							
D. hepatitis B							
E. cirrhosis							
F. colon cancer							
G. ulcerative colitis							
H. Crohn's disease							
I. cystic fibrosis							
J. intestinal cancer							
K. any other cancer/digestive prob.			X				Father on/off has had constipation in 50's. Colonoscopy at age 55 clean. Takes Fiber supplement. No problems in 5 years. (Now 64)
METABOLIC/ENDOCRINE							
A. diabetes mellitus							
B. hypoglycemia							
C. thyroid cancer							
D. thyroid disease							
E. goiter							
F. adrenal dysfunction or disorder							
G. hyperactivity							
URINARY							
A. kidney disease							
B. other disease of urinary tract (urethra, bladder, ureter)							
GENITAL/REPRODUCTIVE							
A. undescended testicle							
B. hypospadias							
C. prostate cancer							
D. uterine fibroids							
E. ovarian cysts							
F. cancer of cervix, ovaries or uterus							

	You	Mother	Father	Siblings	Grandparents	Other Family	Explain
NEUROLOGICAL							
A. migraines							
B. mental retardation							
C. senility before age 50							
D. Multiple Sclerosis							
E. Cerebral Palsy							
F. epilepsy							
G. hydrocephalus							
H. disorder of the spinal cord							
I. Huntington's chorea							
J. Gaucher's disease							
K. Wilson's disease							
L. Creutzfeldt-Jacob disease							
M. Alzheimer's disease							
N. other diseases of the nervous system							
MENTAL HEALTH							
A. schizophrenia							
B. bipolar or manic depressive							
C. depression							
MUSCLE/BONE/JOINTS							
A. muscular dystrophy							
B. other chronic muscle disease							
C. lupus							
D. deformity of the spine							
E. osteoporosis							
F. dwarfism							
G. heredity low back disease							
H. arthritis							
I. gout							
SIGHT/SOUND/SMELL							
A. deafness before age 60							
B. deformity of the ear							
C. cataracts before age 50							
D. blindness							
E. color blindness							
F. glaucoma					X		Paternal Grandma
G. deviated septum							
H. any other sight/sound/smell disorders							
SKIN							
A. acne							
B. eczema							
C. skin cancer							
D. pigmentation disorders							
E. other disorders of the skin							
OTHER							
A. alcoholism							
B. drug abuse, misuse or addiction							
C. breast cancer							
D. any other cancer not mentioned Above							
E. any other condition not mentioned Above							

RISK FACTORS	Yes	No	Comment
Have you ever been sexually active with a male who was gay or bisexual?		No	
Have you ever injected drugs or had a sexual partner who did so?		No	
Have you ever had hemophilia or received any human derived clotting factor concentrates, including factor VIII or factor IX concentrate?		No	
Have you ever had a sexual partner with hemophilia or who received any human derived clotting factor concentrates?		No	
Have you ever had sex in exchange for money or drugs?		No	
Have you ever been sexually active with a person who has had sex in exchange for money or drugs?		No	
Have you ever been sexually active with a person who was known or suspected to have HIV, hepatitis B or hepatitis C?		No	
Have you been exposed to body fluids, open wounds, non-intact skin or mucus membranes of any person known or suspected to have HIV, hepatitis B and/or C?		No	
Have you had an accidental needle stick within the past 12 months?		No	
Have you ever been or have you had a sexual partner who was incarcerated for 72 consecutive hours or longer?		No	
In the past 12 months, have you lived with or had contact with anyone known or suspected to have hepatitis?		No	

(Cont'd)

Have you acquired a tattoo or other skin piercing procedure within the preceding 12 months?	No
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Have you ever been diagnosed with hepatitis?	No
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Have you been vaccinated or had contact with anyone vaccinated for smallpox within the past 2 months?	No
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Have you ever been diagnosed with or suspected to have West Nile Virus?	No	if so, when?
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Have you ever been treated for or diagnosed with chlamydia, gonorrhea, herpes or syphilis?	No	if so, when?
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Have you or any of your blood relatives been diagnosed and/or have a history of transmissible spongiform encephalopathy such as Creutzfeldt-Jakob disease or variant Creutzfeldt-Jakob disease?	No	if so, who?
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Have you ever received a non-synthetic dura mater transplant or a pituitary-derived growth hormone?	No
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Do you have a history of changes in cognition, speech or gait?	No
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Have you ever received a blood transfusion?	No	if so, where?
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Have you visited or lived in the United Kingdom for three months or more between 1980-1996 including England, Scotland, Wales, Ireland, Isle of Man, Channel Islands, Gibraltar or Falkland Islands?	No
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(Cont'd)

Were you a member of the US military, civilian military, employee or a dependent of a member of the military stationed in Belgium, the Netherlands, Germany, Spain, Portugal, Turkey, Italy or Greece between 1980-1996?

No

From 1980 to present, have you spent time that adds up to 5 years or more in Europe?

No if so, where?

Were you born in or have you lived in any of the following Countries since 1977; Cameroon, Central Africa Republic, Chad, Congo, Equatorial, Guinea, Gabon, Niger or Nigeria?

No If so, when?

If yes, were you given a blood transfusion or any medical treatment with a product made from blood while you were there?

No

Have you ever had sexual contact with anyone who was born or lived in Cameroon, Central Africa Republic, Chad, Congo, Equatorial, Guinea, Gabon, Niger or Nigeria since 1977?

No

Have you or someone you know been diagnosed, treated or suspected of having sudden acute respiratory syndrome? (SARS)?

No if so, when?

Have you, your sexual partner, and/or anyone you live with ever had a transplant or other medical procedure that involves being exposed to live cells, tissues or organs from an animal?

No if so, who?

Have you been exposed to blood, saliva or fluids from the person described in the proceeding question?

No

Have you ever received a human organ, tissue transplant or human extract?

No

(Cont'd)

Have you ever been excluded as a blood donor?	No
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Have you been diagnosed or suspected to have Chagas' disease?	No
---	-----------

Have you been exposed to significant levels of radiation, toxic chemicals, or heavy metals (such as lead, mercury or gold) in your home or work environment?	No
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Have you received a bite from an animal suspected for rabies within the last six months?	No
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CONSENT FORM

Under the penalty of perjury, I attest that all of the information I have provided in my donor application is true and complete to the best of my knowledge. I also have a good understanding of the commitment involved in the egg donation process.

Donor's Printed Name: _____

Donor's Signature: _____

Date: __10/15/10_____

I _ _____ give An Eggceptional Match, LLC full authority to include my photographs on its web site, and to share my personal profile with prospective parents but without disclosing to them any of my identifying information. I hereby release An Eggceptional Match, LLC and Angela Bevill, and their agents, employees, successors and assigns, from any and all liability of any nature whatsoever as a result of such disclosures.

Donor's Signature: _____

Date: 10/15/10_____

Witness to Signatures above: _____

Date: __10/15/10_____

