NEW YORK STATE OF OPPORTUNITY. Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

NYS Donate Life Organ and Tissue Donor Registry Specification Form

Please Print (* required)

Prefix: _____ (Dr., Fr., etc)

*First Name: _____

Middle Init: _____

*Last Name: _____

Suffix: _____ (Jr, Sr, II, etc)

*Address: _____

_____

*City: _____ *State: _____ *Zip: _____

Phone: (_____) _____ - _____

*Date of Birth: _____/_____/_____ *Gender: _____Male_____Female

*Height: _____feet_____inches *Eye Color: _____

9- digit Motor Vehicle license or
non-driver license DMV issued ID number: _____

* I offer the donation of:

- ❑ All Organs, Tissues and Eyes
- ❑ Limited Organs, Tissues and Eyes as specified below

  Please CHECK the box of the organs and tissues that YOU WISH TO DONATE:

  - ❑ Bone and Connective Tissue
  - ❑ Corneas
  - ❑ Eyes
  - ❑ Heart (For Valves)
  - ❑ Heart with Connective Tissue
  - ❑ Kidneys
  - ❑ Liver/Iliac Vessels
  - ❑ Lungs
  - ❑ Pancreas (with Iliac Vessel)
  - ❑ Skin
  - ❑ Small Intestine
  - ❑ Veins

* I wish to donate the organs and or tissues specified above for:

- ❑ Transplantation and Research
- ❑ Transplantation only
- ❑ Research only

I wish to enroll in the New York State Donate Life Organ and Tissue Donor Registry maintained by the State Department of Health. I understand that by enrolling in the registry I am giving legal consent to the donation of my organs tissues and eyes (as specified above) in the event of my death. I authorize the State Department of Health to access this information as needed in administration of the registry, and to share this information at or near the time of my death with federally regulated organ procurement organizations, New York State licensed tissue and eye banks and entities formally approved by the Commissioner.

_____ _____/_____/_____

Signature Date

Mail to: **New York State Donate Life Organ and Tissue Donor Registry**
New York State Department of Health
875 Central Avenue
Albany, NY 12206

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