

Donor #: PD - 0010817

General:

Race Group:	Black
Height:	1.70m
Date of Birth:	15 January 1996
Hair Colour (as a Child):	Black
Hair Colour (as an Adult):	Black
Hair texture (as a Child):	African Afro
Eye Colour:	Dark brown
Face Shape:	Oval but longish
Nose Shape:	Round
Other Physical Information (Build and other physical traits):	Tall and slender figure
Blood group:	O+
Do you have children:	Yes
Skin Complexion:	Caramel
Other defining traits such as breast cup, size shoe size, freckles, dimples, etc.	36B size cup, size shoe is size 5, no freckles and no dimples.
Are you left handed or right handed?	Right handed
Are you a twin?	No
Are you adopted?	No
Are you a smoker?	No
Alcohol consumption per week?	25-50 ml
Do you wear glasses?	No
What language(s) do you speak?	English, Xhosa, Sesotho and SeTswana
Relationship Status?	Single
In which town and province do you live?	Port Elizabeth, Eastern Cape
Preferred town that you wish to donate in?	Port Elizabeth
Would you consider donating in Cape Town & Johannesburg if travel costs are covered?	Yes
About you (profession, interests, type of person):	I am a student at Nelson Mandela University pursuing the course of Public Management
Personal message to egg donation recipient:	I hope that you will love and give your baby a warm home

Professional and Academic Info:

Highest grade achieved at school?	Grade 12
Do you have Post Matric qualifications?	No
What is the name of any course / degree completed?	Still Studying towards my Degree at NMU

Behavioural Traits:

What is most important in life to you?	Honesty
What are your views on religion and spirituality?	Everyone should believe in something in order to have a sense of belonging. These beliefs are bound to be different from one person to another so acceptance and respect of beliefs that are different to yourself shows a person's level of growth and maturity.
Are you more introverted or extroverted?	Introvet
Would you prefer to read the book or watch the movie?	Watch movies
Are you musical or played any musical instruments?	No
Do you prefer indoors or outdoors?	It depends on the occasion
Are you more creative or analytical?	Analytical
Have you donated eggs before?	No

Medical History:

Any physical handicaps or deformities?	No
Do you have a history of Asthma?	No
Please indicate if you have any allergies?	Not Specified
Have you or your family members had any skin disorders, albinism, ectodermal dysplasia, eczema, acne, etc:	No
Have you or your family members had any cancer?	No
Have you or your family members had any heart problems?	No
Have you or your family members ever suffered from/ currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid haemophilia, blood clotting, paralysis and porphyria?	No
Have you or your family members had any mental or psychological diseases/ learning disorders including but not limited to genetic depression, bi polar, psychiatric illness etc. Please elaborate and indicate if genetic:	No
Do you or your family members have any genetic diseases or are you or your family member a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis and sickle cell?	No
Please indicate if any twins in your family?	Not Specified
Are there any fertility problems in your family?	No
Does anyone if your family suffer from Alcoholism or Substance Abuse?	No

Information of Parents:

Country of Origin and Ancestry for Mother and Father?	South Africa
Language spoken for Mother and Father?	Xhosa
Race for Mother and Father?	Black
Natural Hair colour for Mother and Father?	Black
Eye colour for Mother and Father?	Dark brown
Height for Mother and Father?	Unsure
Are your parents still alive?	Yes my father
If deceased, cause of death?	Mother shot at work
Age (if living, or age deceased)?	My father is 56 years old
Please specify if the race of your grandparents is different to yours. If mixed race, please specify race for maternal and paternal grandparents?	N/A

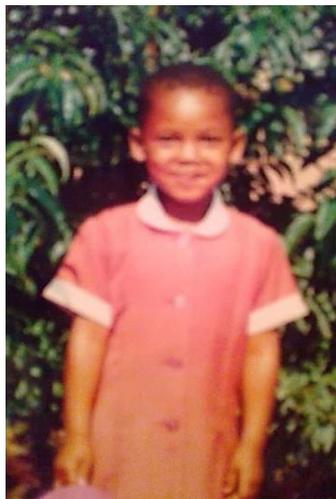
Declaration:

I confirm that I have made myself available as an egg donor Hope Egg Donation Agency. I declare that the above information is true and correct, all information provided is correct and pictures are all of me. I agree to keep the agency updated with the donor program (screening, blood tests, scans, egg retrieval). I agree that I will be prescribed medication to potentially synchronise my menstrual cycle with that of the recipients and will be given hormones in a controlled environment by professional fertility specialists to stimulate donor egg development.

I agree to participate as required as recipient couples often have to travel in order to participate in the egg donation program and would have incurred considerable financial and emotional costs. I consent to participate in the Hope Egg Donation Program and participate as required and understand the concept of anonymous egg donation and claim no further rights over any child(ren) conceived of egg donation.

Do you agree with the above declaration?	Yes
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Photographs and Additional Info:



Donors Daughter



Donors Daughter