



drushti daan

Eye Bank

(Regn. No. 21416/220 of 2001-2002)

501, Kharvel Nagar, Bhubaneswar- 751001, Phone : 0674-2391919

PLEDGE FORM FOR EYE DONATION

Date :

I / We hereby wish to donate my/our eyes upon death .

Sl.No	NAME	SEX	AGE	SIGNATURE

Address : _____

Telephone No : _____

Please fill up the form using block letters and post it to our above address.

Please discuss the issue with your family and fill this form.