Ontario ServiceOntario

Gift of Life Consent Form
Organ and Tissue Donor Registration

You can help to save a life by consenting to be an organ and tissue donor!

To register your consent to be an organ and tissue donor with the Ministry of Health and Long-Term Care you can:

- Visit ServiceOntario.ca/BeADonor to complete the Online Organ and Tissue Donor Registration
- Mail this completed ***and signed*** Consent Form to:

  Organ Donor Consent
  ServiceOntario
  PO Box 48
  Kingston ON K7L 5J3
- Bring a completed ***and signed*** Consent Form to a ServiceOntario centre. Go to ServiceOntario.ca/findservices to find the location nearest you.

Consent forms can be found online at **BeADonor.ca.**

ServiceOntario is responsible for processing Gift of Life Consent forms on behalf of the Ministry of Health and Long-Term Care.

Be informed! Please visit **BeADonor.ca** for more information on organ and tissue donation or call 1 800 263–2833.

In making your decision to consent, please consider the following:

- One organ and tissue donor can save up to 8 lives and enhance 75 others.
- You must be 16 years of age or older in order to consent to the donation of your organs and tissue.
- By filling out this Consent Form you are consenting to the Ministry of Health and Long-Term Care's collection of your information about your decision to donate your organs and tissue.
- The Ministry will use the information about your decision and disclose it to the Trillium Gift of Life Network for the purpose of ensuring that your donation decision is known.
- If you consent, the words "Donor/Donneur" and a code showing your donation decision will be printed on the back of your photo Health Card.
- You have the right to decide whether or not to consent to the donation of your organs and tissue. Your consent is not required in order to be eligible for a Health Card. You may change or withdraw your consent at any time *in writing* by going online to **ServiceOntario.ca/BeADonor**, going to a ServiceOntario centre or writing to the address above.

Notice
The personal information you provide on this form is collected by the Ministry of Health and Long-Term Care for the purpose of recording your decision to be an organ and tissue donor. It may be used and disclosed in accordance with the *Personal Health Information Protection Act,* 2004, as described in the Ministry's "Statement of Information Practices", which are available at Ontario.ca/health. In addition, the Trillium Gift of Life Network will collect this information from the Ministry for the purpose of facilitating organ and tissue transplants and research in Ontario in accordance with section 8.19 of the *Trillium Gift of Life Network Act*.

If you have questions about registering, changing or withdrawing your consent, please call ServiceOntario INFOline:

Toll free:	1 866 532–3161 416 314–5518 (in Toronto)
TTY toll free:	1 800 387–5559 416 327–4282 (in Toronto)
or write to:	Team Manager ServiceOntario Contact Centre PO Box 105, 777 Bay Street Toronto ON M5G 2C8

Clear Form

Microfilm use only

Health Number

Sex ☐ M ☐ F

Date of Birth *(yyyy/mm/dd)*

Telephone No. ( )

Last Name

First Name

Mailing Address

Apt.

City

ON

Postal Code

I would like to help save a life by consenting to be an organ and tissue donor for:

☐ 1. transplant only

☐ 2. transplant and organ and tissue research

*I wish to donate any needed organs or tissue **except** for those indicated below. (Check only organs and tissue you **do not** want to donate. If you would like to donate all needed organs and tissue, leave these boxes blank.)*

☐ a. kidneys	☐ e. liver
☐ b. heart	☐ f. lungs
☐ c. eyes	☐ g. skin
☐ d. bone	☐ h. pancreas

I am consenting to be an organ and tissue donor after my death.

Signature	Date
	2011-10-05

Remember – Once you have made your decision, be sure to inform your family and friends of your decision to donate.

Print Form

Gift of Life / Don de vie

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