



ACRC Gametes Donation

ACRC Global Fertility Holding Group

Donor Code: CD1371



Eye Color

Brown

Hair Color

Brunette

Height

165 cm

Ethnicity

Caucasian

Blood Type

A+

Education

University

Donor Location

Spain

Willing to Travel Out of State?

Date of Birth

09/09/1997

SHUOIO



Donor Questionnaire

Please choose a pseudonym for your profile:

Basic Information

Date of Birth	<u>09/09/1997</u>
Height	<u>165 cm</u>
Weight	<u>48 kg</u>
Hair Color	<u>Brunette</u>
Eye Color	<u>Brown</u>
Ethnic Origin	<u>Caucasic</u>
Maternal Heritage	<u>Caucasic</u>
Paternal Heritage	<u>Caucasic</u>
Blood Type	<u>A +</u>
Visa	<input type="checkbox"/> *Yes <input type="checkbox"/> No

Education and Background

Highest Level of education	<u>University</u>
College Major	<u>Dramatic Arts</u>
What was your college GPA?	<u>8,5/10</u>
What college(s) or university(ies) have you attended?	<u>Escuela Universitaria de Artes de Madrid</u>
Do you have any artistic abilities? Please List:	<u>Acting, Dancing,singing and i can Aldo play the guitar and xylophone</u>
Do you have any athletic abilities?	<u>Judo (green belt), pilates, yoga, kick boxing and climbing</u>
What is your current occupation?	<u>Theater theacher andcontent creator</u>

Please describe your personality:	<u>Funny, extrovert, polite, friendly And brave</u>
Do you wear or have you worn eyeglasses? If yes, at what age did you start wearing them?	<u>No</u>
Have you worn braces?	<u>Yes</u>

Questions:

- Why do you want to become a donor?

I love the fact that i can help a family be complite, and i'm not planing on having kids.

- For Egg Donor: Being a donor is a big responsibility. It requires going to several doctor's appointments, taking injections and having minor out-patient surgery. Do you feel prepared to commit to this process?
Yes, i'm ready for it.
- Are you open to being matched with all types of families regardless of sexual preference, marital status, ethnicity or sex of the egg recipient?
Yes, i don't have any issues with it. Every family should have the oportunnity.
 - If no, please explain:
- If they request it, are you willing to meet your intended parents?
Yes
- Are you open to meeting the child in the future if that is requested?
No
- Are you open to exchanging future contact information with your intended Parents(s)?
No
- Where did you grow up?
Madrid, spain
- Do you have any siblings? If so, tell us about each of them:

Yes, two, im the youngest. My older siblibg is Patricia, she can speak 5 leanguages and she has just gave birth to my first nephew Tirso. My other sibling is Eduardo and he is a car restorer macanic.

- Do you have any children? If so, tell us about each of them:
No

Personal Health History

- Any past or current medical problems (including surgeries, accidents, birth defects, depression, etc.)? If yes, please list:

Appendicitis

- Do you drink alcohol? If yes, how many drinks per week?
Three glasses of wine,during social events.

- Have you ever been a donor before? If yes, did a pregnancy occur?

No

- Are you currently taking any medication (for physical or mental health)? If yes, what medications are you on and why?

No

- Are you taking any recreational drugs? If yes, what are you taking?

No

- Do you smoke?

No

Egg Donor Please answer:

- Have you ever been pregnant? If yes, how many times and what was the outcome?

No

- Are your menstrual cycles regular? If no, please explain:

Yes

Family Medical History

Note:

Medical history will be verified. Anything purposefully omitted may result in being dropped from the program.

If any of the following has occurred in your family, please list which family member and explain:

Biological Family Member	Sex	Age	Height	Eye Color	Hair Color	Education Level	Deceased	Occupation
Father	M	64	175	Green	Brunette	12Grade	None	Sells manager
Mother	F	64	168	Brown	Brunette	12Grade	None	Civil servant
Paternal Grandmother	F	89	165	Green	Blond	9Grade	None	None
Paternal Grandfather	M	(Death)	175	Blue	Brunette	9Grade	None	None
Maternal Grandmother	F	97	172	Brown	Brunette	9Grade	None	None
Maternal Grandfather	M	Death	174	Brown	Brunette	9Grade	None	None
Sibling	F	37	168	Brown	Brunette	Colege	Celiac	Motherhood
Sibling	M	35	173	Brown	Brunette	Colege	None	Mecanic

Sibling								

Disease/Medical Condition	Check one	To Whom	Passed away?	Age of onset/Medication	Age at the time of passing
Cancer	no		Yes No		
Mental Retardation	no		Yes No		
Autism / Asperger's	no		Yes No		
Physical Malformation	no		Yes No		
Paralysis or crippling disorders	no		Yes No		
Alcohol or Drug Addiction	no		Yes No		
Cystic Fibrosis	no		Yes No		
Sickle Cell Anemia	no		Yes No		
Lupus	no		Yes No		
Miscarriages, still births, neonatal deaths	no		Yes No		
High blood pressure, heart attacks or strokes	no		Yes No		
Memory loss or dementia	no		Yes No		
Osteoporosis	no		Yes No		
Arthritis	no		Yes No		
Allergies	no		Yes No		

Disease/Medical Condition	Check one	To Whom	Passed away?	Age of onset/Medication	Age at the time of passing
Blood diseases	no		Yes No		
Diabetes (Specifically Type 1 or Type 2)	no		Yes No		
Thyroid issues	no		Yes No		
Learning disabilities	no		Yes No		
Seizure or epilepsy	no		Yes No		
Depression	no		Yes No		
Panic attacks	no		Yes No		
Schizophrenia	no		Yes No		
Bipolar Disorder	no		Yes No		
ADD or ADHD	no		Yes No		
Age-related issues	no		Yes No		
Kidney problems / diseases	*no		Yes No		
Reproductive problems: i.e. endometriosis, hysterectomies, late-term miscarriages, etc.	no		Yes No		
Vision/Sight/Eye Problems	no		Yes No		













