



ACRC Gametes Donation

ACRC Global Fertility Holding Group

Donor Code : CDV006



Eye Color	Hair Color	Height
Dark Blonde	Blue	165 CM/ 57 KG
Ethnicity	Blood Type	Education
Caucasian	A	College Graduate
Donor Location	Willing to Travel Out of State?	Date of Birth
Spain		1997



Basic Information

Date of Birth	03/31/1997
Height	5,4 ft
Weight	125 lb
Hair Color	Dark blonde
Eye Color	Blue
Ethnic Origin	Caucasic
Maternal Heritage	Caucasic
Paternal Heritage	Caucasic
Blood Type	A+
Visa	Yes

Education and Background

Highest Level of education	University
College Major	Veterinary
What was your college GPA?	8
What college(s) or university(ies) have you attended?	University of Madrid
Do you have any artistic abilities? Please List:	Cooking, specially bakery and vegan. Photography, painting and crafting different things.
Do you have any athletic abilities?	I ride horses, I love ice skating, and the two sports I practice regularly are aerial silks and pole dance which I love
What is your current occupation?	Student and volunteer in an animal shelter.
Please describe your personality:	I am very outgoing, happy-go-lucky, organized (like, really organized, I love planning everything from the daily routine to every plan or trip with friends, and making lists), clean and tidy, funny, kind and respectful, smart, with a very good (and worked) emotional management. I'm also altruist, very calm in every situation, resourceful and open-minded.
Do you wear or have you worn eyeglasses? If yes, at what age did you start wearing them?	No
Have you worn braces?	No, never

Questions:

- Why do you want to become a donor?

I've done it twice and it's been an easy and rewarding process knowing you are helping someone have a baby when I want none of my own

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?

Totally

- Are you open to being matched with all types of families regardless of sexual preference, marital status, ethnicity or sex of the egg recipient?

Sure, much better if they are lgbt + families

- 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)?

Yes

- Where did you grow up?

In Madrid, Spain.

- Do you have any siblings? If so, tell us about each of them:

No

- 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:

No

- Do you drink alcohol? If yes, how many drinks per week?

No, never

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

Yes, two times. I know about one but the other clinic didn't tell me.

- 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, I have never

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, like every 30-32 days, very regular

Disease/Medical Condition	Check one	To Whom	Passed away?	Age of onset/Medication	Age at the time of passing
Cancer			Yes		
Mental Retardation			Yes No		
Autism / Asperger's			Yes No		
Physical Malformation			Yes No		
Paralysis or crippling disorders			Yes No		
Alcohol or Drug Addiction			Yes No		
Cystic Fibrosis			Yes No		
Sickle Cell Anemia			Yes No		
Lupus			Yes No		
Miscarriages, still births, neonatal deaths			Yes No		
High blood pressure, heart attacks or strokes			Yes No		
Memory loss or dementia	Yes	Maternal grandfather	Yes	Unknown	around 85 from covid
Osteoporosis			Yes No		
Arthritis			Yes No		
Allergies			Yes No		
Blood diseases			Yes No		
Diabetes (Specifically Type 1 or Type 2)			Yes No		
Thyroid issues			Yes No		
Learning disabilities			Yes No		
Seizure or epilepsy			Yes No		
Depression			Yes No		
Panic attacks			Yes No		
Schizophrenia			Yes No		

Bipolar Disorder			Yes	No		
ADD or ADHD			Yes	No		
Age-related issues			Yes	No		
Kidney problems / diseases			Yes	No		
Reproductive problems: i.e. endometriosis, hysterectomies, late-term miscarriages, etc.			Yes	No		
Vision/Sight/Eye Problems			Yes	No		













