



Delivery Statement

(All not dotted lines **must** be filled in)

ID number: _____ (only if own units) Deposit number: _____

Donor number (only if reserved donor units): _____

Name: _____

Address: _____

Zip code: _____ City: _____

State: _____ Country: _____

Name of spouse (ID number): _____

By my signature I confirm that the units (own or reserved from Cryos donor) deposited at Cryos shall be delivered to:

Name: _____

Address: _____

Address: _____

Zip code: _____ City: _____

State: _____ Country: _____

Please indicate number of units, quality, etc. to be delivered. If nothing is indicated, I hereby authorise Cryos to choose for me:

Please indicate shipping date: _____

Please select shipping method for sperm (pick up/dry ice/nitrogen tank) _____

Eggs will be shipped in a large nitrogen tank.

I will pay any costs related to the handling and shipment according to this Delivery Statement. Shipping prices are available on our website.

Date: _____ Signature: _____

***** Copy of valid picture ID must be attached (passport, driving license, etc.) *****

Control/date: _____

(to be filled out by Cryos)