



THE EYE FOUNDATION

POST GRADUATE INSTITUTE OF OPHTHALMOLOGY

582-A, D.B. Road, R.S. Puram

Coimbatore - 641002.

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F: 0422 - 2542702

E-Mail: eyefoundation@vsnl.net / theeyefoundation@vsnl.net

Web: www.theeyefoundation.com

14 / 22, Harvey Road

Tirupur - 641602

T: 0421 - 2232333/34

F: 2232335

Date:

FAMILY PLEDGE FORM FOR EYE DONATION

In the hope that we may help others, we hereby make this anatomical gift to be effective upon our death. We would like to donate our eyes after death for the purpose of transplantation, research and education. We would further take the responsibility of informing the Eye Bank of any death that we come to know and arrange for eye donation.

No.	NAME IN BLOCK LETTERS	SEX	AGE	RELATIONSHIP	SIGNATURE

Signature of the witness

Signature of the Head of the Family

Name.....

Name.....

Address.....

Address.....

.....

.....

Telephone.....

Telephone.....

FOR OFFICE USE

P.D.D. Nos..... Despatched on.....

Courtesy:

DONATE EYES - GIFT SIGHT

SOME FACTS ON EYE DONATION

We have 2.5 million corneal blind in our country. It is tragic that 20,000 blind add on to this backlog each year. Most of them can regain vision by Corneal Grafting Surgery, but only if we donate the eyes of each one of our departed friends, kith and kin.

1. Register yourselves, family and friends as **EYE DONORS**.
2. Diabetes, Hypertension, Cancer, Old Age, Wearing Spectacles etc., are **NO BAR** for eye Donation.
3. Eyes should be collected **WITHIN SIX HOURS** of death.
4. Eyes will be collected at donor's place **ANY WHERE IN COIMBATORE, TIRUPUR** or any **WHERE NEARBY AT TIME, DAY OR NIGHT**.
5. Collection of Eyes takes only 20 minutes and does not **DISFIGURE** the face of the donor.
6. The deceased **NEED NOT NECESSARILY BE AN EYE DONOR** for donation of eyes.
7. Collection, processing & distribution of eye are done totally **FREE OF COST**.
8. When you come **ACROSS** death, please
 - a) **MOTIVATE** for Eye donation.
 - b) **INFORM** the Eye Bank immediately.
 - c) Put a polythene cover filled with ice cubes on the deceased's **FOREHEAD**.
 - d) **RAISE** the head with a pillow and put off the fan.
9. The completed Eye Donation Pledge Form may please be sent to

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*Gift of Vision:
The greatest legacy you can leave behind
The Eye Foundation*