

Enrol now.

Please don't leave it to someone else.

NHS
Blood and Transplant

If you are interested in becoming a blood donor, please fill in the form below and return it to us – it really couldn't be easier.

Please complete all details where applicable.

Without them we cannot ask for your help.

Title Surname

Forename (s)

Date of Birth Gender (please tick) Male ☐ Female ☐

Donor number (if you've given blood before)

Home Address

.....

.....

.....

..... Postcode

Telephone No

Mobile No

Email Address

Where would you prefer to donate, if you do not wish to donate near your home?

Town Postcode

Do you wish to be contacted by email ☐ and/or SMS ☐?

Please tick if you would like to receive a DVD about giving blood - "It's easy when you know how" ☐

Signature **X** Date

(Please sign here)

When complete please place in an envelope and return to:

**National Blood Service, Donor Relations
- Marketing, FREEPOST (SO 839), Coxford
Road, Southampton, Hampshire SO16 5AF
(No stamp required)**

I would like to join the NHS Blood Donor Register as someone who may be contacted and would be prepared to donate blood. I understand that NHS Blood and Transplant (NHSBT) or its agents may contact me by letter, phone, SMS (text message) or e-mail with details of local donation sessions. I understand that NHSBT keeps its records up-to-date by matching donors' details with central NHS records. I understand that NHSBT will not disclose any personal details to third parties without first seeking my consent.

**Gift Of Life
Appeal**



A Daily Echo Campaign

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