



**Embryo Donation**  
INTERNATIONAL  
Building Families

## **IDP™ Request Form**

### **Donor-Conceived Offspring Request**

#### **Introduction:**

Your embryo donors agreed to participate in the embryo donor Identity Disclosure Program (IDP™) thereby agreeing to have Embryo Donation International (EDI) release the donor's contact information to you. Your parent(s) will have registered your birth with EDI providing a copy of our birth certificate. Since you have reached the age of 18 or more, you may directly request this information without your parent's consent.

#### **Previous Registration of Your Birth:**

Your parents were required to register all births resulting from embryo donation within three months of delivery in order to process your request for identifying information. If your parents failed to register your birth, no guarantee will be provided in the release of the donor's identifying information to you. The lack of registration makes it very difficult for EDI to release private identifying information about the donors to you.

#### **Your Rights Under the IDP™ Agreement:**

Upon receiving this completed form with all requested materials, we will contact the donors to ask them what the preferred method of contact with you should be. This will be communicated to you by the EDI staff. If the donors fail to respond to our requests within 90 days, identifying information will be sent to you by default.

If you attempt to contact the donors but they do not respond within 90 days, the identifying information will be provided to you by default.

Finally, by default, we will release all identifying information regardless of the above interactions at 180 days from your original request understanding that if contact with the donor was minimal and they didn't actually provide true identifying information, you will still have access to this information per the IDP™ agreement the donors and your parent(s) signed.

We feel the above steps will help smooth the interaction process. Out of respect to the embryo donors, we feel they should guide the contact with you. Out of respect to you, we will eventually provide the identifying information, regardless of all contact attempts by EDI and yourself with the embryo donors, approximately six months after your initial request with EDI.

## **Mental Health Professional Assistance:**

Counseling by skilled mental health professionals to assist you is both encouraged and will be made available upon request.

## **What You Must Provide:**

A copy of your birth certificate and a copy of a photo ID (e.g., driver's license) will be required to process this request. This form must be completed by each embryo donor-conceived offspring in order for each individual to receive the information. Such information should not be disclosed to others without the express permission of the embryo donors.

-Please complete the information below-  
(Please print legibly!)

### Embryo Donor Information:

Donor Number: \_\_\_\_\_ I do not know

Year of embryo transfer resulting in conception:

### Birth Information:

Date of Birth:

Registration of DCO was performed within three months of birth date: Yes      No      I don't know

### Embryo Recipient Information:

Mother's name when embryo donation procedure was completed at EDI:

Date of Birth:

### Partner Information (Where applicable):

My mother did not have a partner at the time of the embryo donation procedure:

Partner's name when embryo donation procedure was completed at EDI:

Date of Birth:

### Current Mailing Address

Best phone to reach you

Email address:

Contact preference:

Misc. comments:

I am hereby requesting that EDI release to me the embryo donor's identity. I understand that EDI will first attempt to guide the contact process but that EDI will, by default, provide identifying information to me no sooner than six months upon my request. EDI has asked the embryo donor's to keep their contact information up-to-date but EDI cannot be held responsible if the information we send you is outdated or incorrect.

I do hereby release and hold harmless any physical or psychological effects that may result from my receiving the requested information.

Embryo Donor Identity Disclosure Request Form, Donor-Conceived Offspring Request (*cont.*)

\_\_\_\_\_  
Donor Conceived Offspring Name (Print)      \_\_\_\_\_  
Donor-Conceived Offspring Signature      \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
EDI Coordinator's Signature      \_\_\_\_\_  
EDI Coordinator's Name (print)      \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Updated: 4/22/2014  
Dropbox\EDI\Protocols\Embryo Donation IDP™\Embryo Donor Identity Disclosure Request Form, Donor-Conceived Offspring  
Request.docx Copyright © 2014, Embryo Donation International, P.L., [www.EmbryoDonation.com](http://www.EmbryoDonation.com)