

ORGAN DONATION The greatest Donation one can ever make

Pledge to give A GIFT OF LIFE TO HUMAN KIND

Become a Proud ORGAN DONOR It costs nothing

Registration Form Life Beyond Corona with SAVRAM Foundation

Name						
Address						
Landmark, if any						
Phone Number			Email ID			
Details of Family Memb	ers*:		1	1		
Name	Age	Educa Occup	- 1	Contact Number	Diseases, if any	Remarks
Details of help / assistar						
Period for which help is						
Detailed Reasons for se						
Income before Corona outbreak*						
Current household inco	ces*					
Declaration : I hereby dec concealed.	clare that I have n	nentioned	d all deta	ails correctly a	nd truthfully and not	hing has been
Date :			Signature:			

* Please attach photo id proofs along with recent photos of all the members and all bank statements of all members for last six months and other supporting documents if financial help needed





