

# Dr Agarwal Eye Hospital & Eye Research Center

Eye Bank of India



Donor No. ....

Date : .....

From : (Permanent Address)

.....  
.....  
.....  
.....

Age : .....

Sex : .....

Ph : .....

To,  
**The Secretary,  
Eye Bank of India,**

**15, Eagle Street, Langford Town,  
Bangalore – 560025  
Karnataka**

Dear Sir,

I wish to donate my Eyes after my death to the Eye Bank of India.

I have informed my kith and kin accordingly and there will be no objection from them.

Yours Faithfully

Witnesses  
With address

\_\_\_\_\_  
Signature

1)

2)

Introduced by : (all in Block letters)

Name : \_\_\_\_\_

Address : \_\_\_\_\_

- Eyes are collected after death of the donor within 4-6 hours.
- Inform the nearest Eye Doctor of Eye Hospital immediately after death.
- Eyes of the dead person should be closed and wet cotton put on the eyes.
- Age and sex are no bar for Eye Donation.
- Persons with defective vision also can donate their eyes.
- After the Eyes are collected, put them in separate bottles.
- Put the bottles in a thermos Flask with Ice and send them to :

## **Eye Bank of India**

15, Eagle Street, Langford Town,  
Bangalore – 560025. Karnataka.  
Ph : 22240736 Fx : 22240200

13, Cathedral Road, Chennai - 86  
Ph : 28279685 Fx : 28265871