

Human Tissue Act 2004

BEQUEST CONSENT FORM—UoBANAT1

Part A: To be completed by person making donation (Please complete in BLOCK CAPITALS)

Title _____ Surname _____ Forename(s) _____
Address _____

Postcode _____ Telephone No _____
Date of Birth _____ Religion (if applicable) _____
Email address (if applicable) _____

I WISH TO DONATE MY BODY AFTER MY DEATH. I UNDERSTAND THAT IT MAY BE USED FOR:

- ANATOMICAL EXAMINATION
- EDUCATION OR TRAINING RELATING TO HUMAN HEALTH
- RESEARCH IN CONNECTION WITH DISORDERS, OR THE FUNCTIONING OF THE HUMAN BODY

Please tick one option as appropriate:

1 ☐ I place no restriction on the length of time my body can be retained by the institute that receives my body. * OR

2 ☐ I wish for my body to be retained for a maximum of 3 years.*

**In certain circumstances your body may be used within a month of arrival.*

Please tick one option as appropriate:

a) ☐ I give permission for my body parts to be retained after my body has been cremated.

b) ☐ No parts of my body may be retained when my body has been cremated.

I confirm that I have read and understand the information contained in 'Donating Your Body to the University of Bristol' information booklet. I understand that there is no guarantee that my body will be accepted.

By completing this form, you agree for your information to be retained in our secure database. Your details will not be shared with third parties, unless it is necessary as part of our bequest enquiry or acceptance processes. Personal data will be securely deleted when the information held is no longer needed as part of the bequest process.

Signature of Donor _____ **Date** _____

Part B: Witness declaration (signature of next of kin, executor, GP, friend, etc.)

I confirm that I have witnessed _____ (*insert name of donor*) completing part A of this form
Surname _____ Forename(s) _____
Address _____
Postcode _____
Telephone number _____ Relationship to donor _____

Signature of Witness _____ **Date** _____

Complete both copies of the form in full.

Return one copy to the Bequest Office, School of Anatomy, University of Bristol, Southwell Street, Bristol, BS2 8EJ. Keep one copy of the form with your Will or legal papers.