



Reproductive Technologies, Inc.

THE SPERM BANK OF CALIFORNIA

2115 Milvia Street, Berkeley Ca 94704 Phone 510.841.1858 Fax: 510.841.0332 Email: staff@tsbca.org

RECIPIENT INFORMATION

Please complete all the information on this form. The information you provide is confidential.

Today's date _____/_____/_____

Are you updating a previous registration? yes no

Legal Name _____ Birthdate _____/_____/_____
First Last (Pronouns) mo day year

Preferred Name: _____

Home address _____
Street City State Zip

Home Work Cell _____ Home Work Cell _____

Can confidential messages be left? yes no

Can confidential messages be left? yes no

Your Email address: _____

If applicable: Spouse/Partner legal name: _____ (Pronouns) _____

Preferred Name: _____ Is partner a registered recipient? yes no

Email address: _____ OK to Email? yes no

Tel: _____ Can confidential messages be left? yes no

Your Relationship Status: Single Partnered Married Other _____

Sexual Identity: Lesbian/Gay Bi Pan Queer Heterosexual Other _____

Your Gender Identity: Check all that apply: Cis Woman Trans Man Genderqueer(GQ)/Non-Binary

Gender Identity of Partner: N/A Check all that apply: Cis Woman Trans Man GQ/Non-Binary

Your Ethnicity/Ancestry: Please check all that apply:

African descent Asian descent Caribbean descent European descent Indigenous/Native American descent
 Jewish descent Latino descent Middle Eastern /Arab descent Pacific Island descent Other _____

Partner's Ethnicity/Ancestry: N/A Please check all that apply:

African descent Asian descent Caribbean descent European descent Indigenous/Native American descent
 Jewish descent Latino descent Middle Eastern /Arab descent Pacific Island descent Other _____

Type of insemination(s) planned: Vaginal IUI IVF IVF/with egg donation IVF w/partner egg

How did you hear about TSBC? Friend Doctor Internet Other _____

I authorize TSBC to charge my one time non-refundable \$100 registration fee to the credit card listed below.

MC/VISA/Discover # _____/_____/_____/_____ Exp. Date _____/_____/_____ Code# _____

Name on card _____ Signature _____

TSBC acct. # _____

Date entered _____/_____/_____

Initials _____