## **4.3 Consent for Artificial Insemination with Donor Semen**

We,		
and	, being husband and wife and both	of
legal age, authorize Dr	to inseminate the w	ife
artificially with semen of a d	onor (registration no; obtain	ied
from	semen bank) for achieving conception.	

We understand that even though the insemination may be repeated as often as recommended by the doctor, there is no guarantee or assurance that pregnancy or a live birth will result.

We have also been told that the outcome of pregnancy may not be the same as those of the general pregnant population, for example in respect of abortion, multiple pregnancies, anomalies or complications of pregnancy or delivery.

We declare that we shall not attempt to find out the identity of the donor.

I, the husband, also declare that should my wife bear any child or children as a result of such insemination (s), such child or children shall be as my own and shall be my legal heir (s).

The procedure(s) carried out does (do) not ensure a positive result, nor do they guarantee a mentally and physically normal body. This consent holds good for all the cycles performed at the clinic.

## **Endorsement by the ART clinic**

I/we have personally	explained to	and	the
details and implications of hi	s/her/their signi	ng this consent/approval	form, and
made sure to the extent humar	nly possible that	he/she/they understand the	ese details
and implications.			
Name, Address and Signatur	e		
of the Witness from the clinic			
	Signed:		
	(Husband)		
	(Wife)		
Name and Signature of the D	octor		
Dated:			