

Thank you for being a blood donor

Blood Donation Pledge Card

First name

Middle

Last name

Street Address

City

State

Zip

Daytime phone

Evening phone

E-mail

Department (if applicable)

Captain's name (if applicable)

I prefer to donate **blood** on

First Choice:

Second Choice:

Date
AM

Time
PM

Date
AM

Time
PM

Donate **blood** now.

People can't live without it.

 **New York Blood Center**
www.nybloodcenter.org

Serving 20 million people in New York,
New Jersey and beyond since 1964.

Search "NYBC"
to download our mobile app

