

ARLETA IVF s.r.o. Komenského 702, 517 41 T: +420 **494 323 420**, + 420 **603 863 653** / E: arleta@arleta.cz www.arleta.cz / IČ: 27496724

## **FURTHER PROCESSING OF CRYO-CONSERVED OOCYTES**

Client	Identification					
Name:	ID:					
Birth number:	PASSPORT:					
Address:	Identified by:  Stamp and signature  (ARLETA, Czech Fertility Clinic)					
	Date:					
	(date of identification)					
	(date of identification)					
L. NOTICE						
Dear Sir,						
we would hereby like to notify you, that, on	, your paid-up storage period for frozen oocyt	es				
ends.						
Please, select one of the options provided below (1. or 2						
<b>illed-in</b> and <b>signed</b> form by post to the following adress: <i>i</i>	ARLETA IVF, Komenského 702, 517 41 Kostelec nad Orli	Сĺ				
Czech Republic.						
	continues to be kept in storage in the ARLETA IVF s.r.					
laboratory as I remain interested in its potential future us	• • • • • • • • • • • • • • • • • • • •					
annual fee of <b>65 EUR</b> . The fee is payable in cash at our fro	int desk, or by bank transfer into the following account:					
Number of bank account: 1388134711/2700						
· · · · · · · · · · · · · · · · · · ·	Z58 2700 0000 0013 8813 4711					
SWIFT: BACXCZPP	3 0013 4711					
Name of the clinic: Arleta IVF, s.r.o.						
Name of the bank: UniCredit Bank						
2. I hereby request my oocytes to be destroyed, as I	am not interested in its future use. I am aware that m	ıy				
signature must be notarized. Or else this form must be si	gned in your personal presence at the ARLETA IVF, s.r.	D.				
front desk, where your signature will be verified against	your identity documents by our staff.					
2. DECLARATION						
hereby declare:						
to possess legal capacity, and that my legal capacity has	s not been limited.					
to have understood the information provided to me, to						
such questions, if any, have been answered to my satis						
·		_				
	in written form inform the company about any change	>				
(address, phone number).						
<ul> <li>all information I supplied to be, to the best of my know</li> </ul>	ledge, complete and true.					
all information I supplied to be, to the best of my know	ledge, complete and true.					
all information I supplied to be, to the best of my know	ledge, complete and true.					
	rledge, complete and true.					
all information I supplied to be, to the best of my know  In on:	rledge, complete and true.	••				

Název dokumentu: F4_340_EN_Further_Processing_of_Cryo-Conserved_Oocytes							
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