

Consent for Transfer of Frozen Embryos

We, _____ and _____
hereby agree to transfer _____ frozen embryos stored at Heartland Fertility & Gynecology
Clinic (Heartland) to _____.

We agree to reimburse _____ for the transport costs of the
aforementioned frozen embryos.

We will not hold Heartland responsible for the accidental loss or destruction of our frozen
embryos.

We consent to the transfer of frozen embryos and have executed this consent and Schedule "A"
attached hereto for that purpose.

Signed this _____ day of _____, 20____.

SIGNATURE

SIGNATURE

WITNESS

WITNESS

