

Notice of Termination of Freezing Agreement

I/We have undergone in vitro fertilization treatment at the Clinic for hormonal and infertility treatment of Tampere University Hospital (Tays). During the treatment, embryos were frozen on the basis of a freezing agreement valid until further notice.

With this form, I/we notify that I/we wish to terminate the storage of the embryos. Once the agreement has ended, our payment obligation for embryo storage will cease. Any fees already paid will not be refunded to the undersigned, even if the agreement is terminated during the current contract period.

I/We want the remaining frozen embryos to be discarded (signature of one spouse is sufficient).

I/We want to donate the remaining embryos for the development of treatment and cultivation methods.

I/We want to donate the remaining embryos for the treatment of an unknown individual/couple.

Place and date: _____

Patient's signature

Spouse's/Partner's signature

Printed name

Printed name

NOTE! Fill in this notice when you no longer wish to continue storage. If you wish to continue storage, this notice does not need to be completed.

Please note that completing the termination notice and disposing of the embryos in any of the ways mentioned above means that your entitlement to receive fertility treatments in the public healthcare system will end.

More information on the reverse side!

Please Note:

- **Complete this form only if you wish to discontinue the storage of your embryos. The embryos will be destroyed immediately upon receipt of the termination notice.**
- Donation of embryos for method development or for the treatment of an unknown couple is not possible if the embryos originate from treatment using donated gametes.
- Embryos may be destroyed even if only one partner wishes them to be destroyed. In such cases, the signature of only one spouse is sufficient.
- Donation of embryos for method development or for the treatment of an unknown couple always requires the signatures of both spouses.
- **For more information, you may call the Fimlab Fertility Treatment Laboratory at 044 472 8438. If necessary, leave a voicemail message — you will receive a return call within three working days.**

This completed form should be sent in a stamped envelope to:

Fimlab Fertility Treatment Laboratory
Arvo Ylpönkatu 4
33520 TAMPERE