

University of Maryland Brain and Tissue Bank  
A Brain and Tissue Repository of the NIH NeuroBioBank  
655 West Baltimore Street, 13-013 BRB  
Baltimore, MD 21201-1559  
800-847-1539 | 410-706-1755

## Donor Registration Form

Name of Donor \_\_\_\_\_

Age \_\_\_\_\_ Disorder \_\_\_\_\_

Name of Contact Person, if other than Donor \_\_\_\_\_

Telephone #: \_\_\_\_\_ Box Preferred contact method

E-mail: \_\_\_\_\_ Box Preferred contact method

Please indicate how you were made aware of the University of Maryland Brain and Tissue Bank

Box Blazeman Foundation for ALS

Box Conquer Chiari

Box The Global Foundation for Peroxisomal Disorders

Box Mucopolidosis Type IV (ML4) Foundation

Box Other organization \_\_\_\_\_

If not through an organization, how did you learn about the brain and Tissue Bank?

Date: \_\_\_\_\_

E-mail the completed form to: [btbumab@umaryland.edu](mailto:btbumab@umaryland.edu)

After submission, one of the project coordinator's will contact you within a week of submission.

If death is imminent please call 1-800-847-1539 immediately.

For additional information call M-F during regular work hours.

Funded by: NIH Contract Number: HHSN271201400045C  
The Blazeman Foundation  
Autism Research Institute