



# *Departmental Blood Drives*

## Registration Form

**Complete shaded (gray) areas:**

<b>Dept. Leader Name:</b>			
<b>Department(s) Participating:</b>			
<b>Department FTE Count*:</b>			
<b>Department Org/Donor Group(s)*:</b>			
<b>Department Contact(s):</b>			
<b>Contact Extension:</b>		<b>Route:</b>	

*\* Information provided by Human Resources*

Please indicate approximate dates for your departmental blood drives below. (Note: Eight weeks must elapse between each drive. If your area requires multiple days/drive, please identify consecutive date choices, i.e. January 2-3.)

The Donor Center will follow up with the department contact to finalize dates, times, and setup.

<b>Approx. Date for 1<sup>st</sup> Drive:</b>	
<b>Approx. Date for 2<sup>nd</sup> Drive:</b>	
<b>Approx. Date for 3<sup>rd</sup> Drive:</b>	

Check Preferred Drive Type:  UTMB Donor Room  Set-Up on Site  Coach on Site

Please forward information to either:

**Reyes Leal Jr.**  
 Administrative Coordinator  
 Blood Collections  
 Office: (409) 772-2540  
 FAX: (409) 772-3193  
 Email: releal@utmb.edu

**Christi G. Hopkins**  
 Community Relations Representative  
 Blood Collections  
 Office: (409) 772-6552  
 FAX: (409) 772-3193  
 Email: cghopkin@utmb.edu