

S - SN 3005, Elliot (6 hour drive from PE)

Availability status:	Available now in Port Elizabeth - travel costs
Race:	Black
Age:	23
Hair colour:	Black
Eye colour:	Brown
Has children:	No
Proven donor:	No
Post matric studies:	Yes
Other physical information:	1.6m., 75kg., curvy
Face shape:	Round
Other personal information:	South African nationality, Xhosa speaking, Christian. Candidate holds a higher certificate in Accounting. She comes from a very academic family. Non-smoker. Reason for donating: I would like to help someone who does not have the ability to have their own baby because of their eggs.
Reproduction history:	No children and no donations as yet.
Views on religion and spirituality:	Christian

Additional Donor Information

Initial Information

In which town and province do you live?	Elliot
Nationality:	South African
Where were you born?	Queenstown
What language(s) do you speak?	Xhosa, English and a bit of Sesotho
Year of birth:	1997
Age:	23
Star sign:	Gemini
Blood group (if known):	Unknown
Why do you want to be an egg donor and if you had a message for your recipient what would it be?	I would like to help someone who does not have the ability to have their own baby because of their eggs.
How do you best describe yourself?	Family oriented reserved person
Relationship status:	New relationship

Physical Profile

Race:	Black/African
Skin complexion:	Brown
Face shape:	round
Nose shape defined by Wikipedia:	African - wide nostrilled nose
Eye shape:	Round Almond
Height in metres:	1.6m.
Weight in kilograms:	75kg.
What is your usual or ideal weight?	75kg.
Build and body shape:	Curvy
Which body part is most sensitive to weight gain or loss?	Stomach and theighs
Eye colour:	Brown
Natural hair colour:	Black
Hair colour as a child:	Black

Hair type:	Afro
Hair texture:	medium
Description of hands and fingers:	Thin long fingers
Any other defining traits such as breast cup, size shoe size, freckles, dimples, etc:	Breast 34C, size 4/5 shoe, waist 36, no freckles
Are you left handed or right handed?	Right handed
With which celebrity do you most resemble - physically?	
Siblings physical traits - hair and eye colour, height, weight and build:	Black hair, brown eyes, tall, slim, well built

Reproductive Information

Are you a virgin?	No
Ever miscarried?	No
No. and ages of children (if applicable):	None
Fertility issues:	None

Health of Egg Donor

Are you a twin?	No
Are you adopted?	No
Current health status, lifestyle, and/or current diseases:	Health is excellent and no diseases
Smoker:	never smoked
Alcohol consumption per week:	None
Do you wear glasses?	Since Early Adulthood
How would you rate your sight?	Well
Any skin disorders, albinism, ectodermal dysplasia, eczema, acne, etc:	Eczema
Have you suffered from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria?	Migraine
Have you had any cancer?	No
Have you had any heart problems?	No

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Please indicate if you have any allergies:	None
Any mental or psychological diseases/learning disorders including but not limited to genetic depression, bipolar, psychiatric illness, etc. Please elaborate and indicate if genetic:	No
Any physical handicaps or deformities? If yes, please state:	No
Do you have any genetic diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, and sickle cell?	No
History of asthma:	No
Indicate any medication you are taking and reason for it:	None
Have you ever been addicted to any substances?	No
Have you partaken in any recreational drugs, had tattoos, or piercings in the last six months? Please explain:	No
Details of any operations:	Tonsils
Are there any health issues of which you are aware that may be of concern for you to become an egg donor? If yes, please state:	No
Any specific diet such as vegan, vegetarian, health conscious, low fat, etc.:	No
How often do you exercise?	When I Get A Chance
In which exercises or sports do you partake now?	None
Have you excelled in any sports?	Yes
What sports did you play at school?	Netball

Professional and Academic Information

Occupation:	Student
What is your ideal career/occupation?	Accountant
What are you doing to get to your desired profession in life?	Studying
Do you have a matric and university exemption?	Matric and Exemption

Subjects and grades or marks at school:	Commercial subjects and D
What is the name of any course/degree completed?	Higher certificate in accountancy
Planned studies:	Diploma in accountancy
In what aspects do you have a keen interest?	
What type of books do you like to read?	Array
Would you prefer to read the book or watch the movie?	Both
Do you know if your IQ was ever tested and the score please?	No

Behavioural Traits

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What is most important in life to you?	Family and my happiness
If you had unlimited resources and could save one thing on earth what would it be?	Nature
What are your views on religion and spirituality, and practiced religion?	Christian
Childhood religion:	Christian
Any specific achievements or aspects of recognition in your family:	None
Interests and hobbies:	Reading, cooking, traveling, walking and watching movies
What is your preferred holiday?	Array
If you were offered an all-inclusive holiday, what would it be?	I would love it to be in Mozambique near the sea where I can take a boat cruise and beach walks
Which interesting places have you visited?	Cape Town,
What are your feelings on animal welfare?	I'm not really an animal lover
Strength and weaknesses:	Strength - I am a confident and self driven person; weakness - I am always putting others before myself
What do others generally think of you?	They see me a quiet person
Favourite flower:	Sunflower
What is your favourite meal?	Wrap
What is your favourite movie?	Bird box
What is your favourite book?	Think like a woman act like a man
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Who is your favourite actor?	
Who is your favourite actress?	
What is your favourite colour?	Burgundy
What is your favourite colour lipstick?	Maroon
What is your favourite perfume?	
Who is your favourite person?	
Are you more introverted or extroverted?	Introverted
Would you prefer to go out with friends or stay in with a loved one or book?	Depends on the situation
Are you musical or played any musical instruments?	Not really
Are you more cultural or more adventurous?	Bit of Both - depending on Situation
Do you prefer indoors or outdoors?	
Which weather do you prefer?	Array
Are you more creative or analytical?	Array

Family Information of Genetic Parents

Nationality for mother and father:	Both South African
Country of origin and ancestry for mother and father:	Both South Africa
Language spoken for mother and father:	Both Xhosa
Professions for mother and father:	Teacher and Researcher
Achievements on an academic level for mother and father:	Mom master degree, dad - PhD in sociology
Race for mother and father:	Both black
Natural hair colour for mother and father:	Both black
Eye colour for mother and father:	Both brown
Height for mother and father:	Standard height
Mother and father build:	Mom - curvy, dad - chubby
Any specific defining traits for both parents:	Mom - talkative, dad - reserved and quiet
Are your parents still alive?	
If deceased, cause of death:	Not applicable

Health status: Please indicate if any twins in your family and the relationship to you: Please list any family members who have had cancer including aunts or uncles and on which family side: Any fertility problems in your family: In your family, has anyone suffered from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria, heart problems? In your family, does anyone have any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Current age or age of items. Current age or age at time of death:	Age (if living, or age deceased):	51 and 56
Please list any family members who have had cancer including aunts or uncles and on which family side: Any fertility problems in your family: In your family, has anyone suffered from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria, heart problems? In your family, does anyone have any genetic diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Only my mother None Any skin disorders, albinism, ectodermal dysplasia, or other in your family — please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	Health status:	Good
cancer including aunts or uncles and on which family side: Any fertility problems in your family: In your family, has anyone suffered from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria, heart problems? In your family, does anyone have any genetic diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	1	Yes, paternal uncles
In your family, has anyone suffered from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria, heart problems? In your family, does anyone have any genetic diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Only my mother Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	cancer including aunts or uncles and on which	Paternal great grandmother
from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria, heart problems? In your family, does anyone have any genetic diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Only my mother None Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? If deceased, state cause of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	Any fertility problems in your family:	None
diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay sachs? Any mental or psychological disease or learning disability or learning d	from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria,	
disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Only my mother Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? If deceased, state cause of death: Unknown she died when mom was still young Current age or age of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	diseases or are a carrier of any genetic concerns including but not limited to thalassemia, cystic fibrosis, sickle cell, tay	None
please state: History of asthma: Only my mother Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Unknown she died when mom was still young Current age or age of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	disability or learning disorders including genetic depression, bipolar, psychiatric illness in siblings	None
Any skin disorders, albinism, ectodermal dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? If deceased, state cause of death: Current age or age of death: Unknown she died when mom was still young Current age or age of death: Unsure Roandfathers still alive? No to Both If deceased, state cause of death: Accident	1	None
dysplasia, or other in your family – please explain: Any other comments regarding any health aspects in your family: Alcoholism/substance abuse: No To Both Grandmothers still alive? Only PGM If deceased, state cause of death: Unknown she died when mom was still young Current age or age of death: Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	History of asthma:	Only my mother
aspects in your family: Alcoholism/substance abuse: Only PGM If deceased, state cause of death: Current age or age of death: Unknown she died when mom was still young Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	dysplasia, or other in your family – please	None
Grandmothers still alive? Only PGM If deceased, state cause of death: Current age or age of death: Unknown she died when mom was still young Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	, , , , , , , , , , , , , , , , , , , ,	None
If deceased, state cause of death: Current age or age of death: Unknown she died when mom was still young Unsure Grandfathers still alive? No to Both If deceased, state cause of death: Accident	Alcoholism/substance abuse:	No To Both
Current age or age of death: Grandfathers still alive? If deceased, state cause of death: Accident	Grandmothers still alive?	Only PGM
Grandfathers still alive? No to Both If deceased, state cause of death: Accident	If deceased, state cause of death:	Unknown she died when mom was still young
If deceased, state cause of death: Accident	Current age or age of death:	Unsure
	Grandfathers still alive?	No to Both
Current age or age at time of death: Unsure	If deceased, state cause of death:	Accident
	Current age or age at time of death:	Unsure

Grandfathers eye colour (maternal and paternal):	Both brown
Grandmothers eye colour (maternal and paternal):	Both brown
Grandfathers hair colour (maternal and paternal):	Both black
Grandmothers hair colour (maternal and paternal):	Both black
Health of grandmothers (maternal and paternal):	Good
Health of grandfathers (maternal and paternal):	
Please specify if the race of your grandparents is different to yours. If mixed race, please specify race for maternal and paternal grandparents:	All black
Any genetic health or psychological concerns worth noting regarding your grandparents:	None
Any notes/comments re family of family health aspects - genetic ito psychological, physical, deformities, diseases, concerns:	None

Egg Donation Stipulations

Please indicate if you have any donation conditions or criteria such as persons to whom you prefer not to donate:	None
Preferred town to donate:	Port Elizabeth
Towns available in which to donate - travel costs will be covered:	Array

Confirmation

I have only made myself available as an egg donor with baby2mom:	Yes
Please advise any specific donation criteria other than those mentioned:	
All information provided is correct and pictures are all of me. I agree to keep baby2mom updated with the donor programme (screening, blood tests, scans, egg retrieval). I will keep baby2mom updated wrt my availability and wrt egg donation pregnancies achieved. I consent to participate in the baby2mom egg donor program	Yes

and participate as required and understand the concept of anonymous egg donation and claim no further rights over any child(ren) conceived of egg donation. I agree that I will be prescribed medication to potentially synchronise my menstrual cycle with that of the recipients and will be given hormones in a controlled environment by professional fertility specialists to stimulate donor egg development. I agree to find more information pertaining to egg donation on the baby2mom egg donor site or ask if I have any further questions about being an egg donor. I agree to participate as required as people often travel from international destinations to participate in a South African egg donation program and have incurred considerable financial and emotional costs: