

## Order to set up a stem cell deposit

Postal address: Vita 34 AG | Perlickstrasse 5 | D-04103 Leipzig

Phone: 00800 034 00 000 | Fax: +49 (0)341 48792-20 | Email: kundenservice@vita34.ch

ast name of mother	e of mother First name of mother		Last name of father	First name of father
street			Street	
Country / postal code / place			Country / postal code / place	e
Telephone			Telephone	
imail			Email	
of birth Existing customer: ID number		Date of birth	Existing customer: ID number	
or the benefit of the unborn child / chi	ldren			
culated delivery date Number of expected children		Attending gynaecologist (name, place)		
Scheduled date of Caesarean	duled date of Caesarean Name of birth centre		Place of birth centre	
/ we order the following ty	pe of contract (	orices include VAT pur	suant to price list date	ed 10/01/2017)
VitaPlus		VitaPlus25		VitaPlus50
Contract fee: 3.100,00 CHF Annual fee as of storage: 60 CHF		Package price: 3.995,00 CHF Annual fee as of the age of 26	60 CHE	Package price: 5.195,00 CHF Annual fee as of the age of 51: 60 CHF
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VitaPlusCordTissue		VitaPlusCore	dTissue25	VitaPlusPlusCordTissue50
Contract fee: 3.600,00 CHF Annual fee as of storage: 90 CHF		Package price: 4.495,00 CHF Annual fee as of the age of 26		Package price: 5.850,00 CHF Annual fee as of the age of 51: 90 CHF
we order the following ty	pe of contract in		irslanden clinic	
VitaPlus		VitaPlus25		VitaPlus50
Contract fee: 2.600,00 CHF Annual fee as of storage: 60 CHF		Package price: 3.495,00 CHF Annual fee as of the age of 26	60 CHF	Package price: 4.695,00 CHF Annual fee as of the age of 51: 60 CHF
VitaPlusCordTissue		VitaPlusCore	dTissue25	VitaPlusPlusCordTissue50
Contract fee: 3.100,00 CHF Annual fee as of storage: 90 CHF		Package price: 3.995,00 CHF Annual fee as of the age of 26	: 90 CHF	Package price: 5.350,00 CHF Annual fee as of the age of 51: 90 CHF
multiple births: 2nd child 50% contract fe	e, 3rd and any further chi	d 0% contract fee. Plus 60 CHF	annual fee for each child.	
I / we choose the addition test. (DNA testing for head			I / we want t extra charge	the <b>express delivery</b> of the collection package a
				the information on the right of revocation and acending an order confirmation to me / us.
	Signature of the	sta ha (mas detect)		the father to be
ite	Signature of the mothe	r-to-be (mandatory)	Signat	ture of the father-to-be

Deutscher Platz 5a | D-04103 Leipzig | Phone: +49 (0)341 48792-0 | Fax: +49 (0)341 48792-20 | Email: info@vita34.ch | Web: www.vita34.ch HRB 20339 | Amtsgericht Leipzig | Ust.IdNr. DE 239 733 620 | Deutsche Bank Zürich, IBAN: CH7487801002000194000, SWIFT Code: DEUTCHZZXXX Chairman of supervisory board: Frank Köhler | Management board: Dr. Wolfgang Knirsch, Falk Neukirch, Alexander Starke