

S - ZH 2943, East London





Availability status:	Available now in Port Elizabeth - travel costs, other regions - travel costs
Race:	Caucasian
Age:	26
Hair colour:	Brunette and wavy
Eye colour:	Brown
Has children:	Yes
Proven donor:	No
Post matric studies:	Yes
Other physical information:	1.69m., 70kg., athletic build and oriental eyes
Face shape:	Square
Other personal information:	South African nationality. Candidate is employed as a teacher to foreign students whilst she is obtaining her degree in interior design. She is a fun, bubbly, energetic, straight forward adn empathetic person. Her interests include the planet, wellbeing of children, the stars, different cultures and how the earth works. Her hobbies include dancing, singing, portrait sketching, also mountain hiking and escaping into nature. She describes herself as a huge fan of beautiful art and music. Very light smoker. Reason for

	donating: I hope to give you the gift of having a beautifull little blessing and may he or she bless you in every way possible.
Reproduction history:	Two helalthy children and no donations as yet.
Views on religion and spirituality:	No religion but believe that there is a God

Additional Donor Information

Initial Information

East London, Eastern Cape
South African
South Africa
Afrikaans and English
1996
26
Sagitarius
Unknown
I would love to be the reason a parent gets to hear the word mommy for the first time. I would like to be a part of a greater happiness.
Outgoing, fun, daring, straight forward, down to earth, kind, empathetic.
Serious relationship

Physical Profile

Race:	White/ Caucasian
Skin complexion:	Tanned

nttps://babyzmom.co.za	2025-11-04 10:10:42
Face shape:	square
Nose shape defined by Wikipedia:	Roman - Convex undulating nose
Eye shape:	Asian
Height in metres:	1.69m.
Weight in kilograms:	70kg.
What is your usual or ideal weight?	65kg.
Build and body shape:	Athletic
Which body part is most sensitive to weight gain or loss?	My breasts
Eye colour:	Brown
Natural hair colour:	Brown
Hair colour as a child:	Brunette
Hair type:	Wavy
Hair texture:	Thick
Description of hands and fingers:	Petite and medium length fingers, strong and beautiful nails
Any other defining traits such as breast cup, size shoe size, freckles, dimples, etc:	Breasts C+, size 5 shoe
Cup size:	Krystal ellisworth
Are you left handed or right handed?	Ambidextrous

Reproductive Information

Are you a virgin?	No
Ever miscarried?	No
Fertility issues:	None

Health of Egg Donor

Are you a twin?	No
Are you adopted?	No
Any current diseases?	Healthy
Smoker:	0 - 5 per day
Alcohol consumption per week:	None
Do you wear glasses?	Never

How would you rate your sight?	Excellent
Any skin disorders, albinism, ectodermal dysplasia, eczema, acne, etc:	None
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?	None
Have you had any cancer?	No
Have you had any heart problems?	No
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:	None
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.:	Vegetarian
How often do you exercise?	A few times a week
In which exercises or sports do you partake now?	Running and yoga

Have you excelled in any sports?	Hockey
What sports did you play at school?	Hockey

Professional and Academic Information

Occupation:	Teacher
What is your ideal career/occupation?	Interior designer /humanitarian
What are you doing to get to your desired profession in life?	Studying
Do you have a matric and university exemption?	No matric
Subjects and grades or marks at school:	Arts, tourism, hospitality
Planned studies:	Interior design and psychology
In what aspects do you have a keen interest?	Arts, and the condition of our planet
What type of books do you like to read?	Array
Would you prefer to read the book or watch the movie?	Watch the Movie
Do you know if your IQ was ever tested and the score please?	134

Behavioural Traits

What is most important in life to you?	Family
If you had unlimited resources and could save one thing on earth what would it be?	My children
What are your views on religion and spirituality, and practiced religion?	No religion but believe that there is a God
Childhood religion:	Christian
Any specific achievements or aspects of recognition in your family:	None
Interests and hobbies:	Dancing, singing, sketching, hiking, adventures
What is your preferred holiday?	Array
If you were offered an all-inclusive holiday, what would it be?	Going to India
Which interesting places have you visited?	Namibia
What are your feelings on animal welfare?	Animals are the source of life taking care of them needs to be done
Strength and weaknesses:	Strengths - being straightforward and standing

nttps://babyzmom.co.za	2025-11-04 16:16:4
	my ground, weakness - being too harsh sometimes
What do others generally think of you?	Intelligent, fun and outgoing
Favourite flower:	Tulip
What is your favourite meal?	Wild mushroom risotto
What is your favourite movie?	The Fault in our Stars
What is your favourite book?	The Journey of Souls
Who is your favourite actor?	Johnny Depp
Who is your favourite actress?	Selena Gomez
What is your favourite colour?	Turquoise
What is your favourite colour lipstick?	Pastel pink
What is your favourite perfume?	Little black dress
Who is your favourite person?	My friend
Are you more introverted or extroverted?	Extroverted
Would you prefer to go out with friends or stay in with a loved one or book?	Go out with friends
Are you musical or played any musical instruments?	I sing
Are you more cultural or more adventurous?	Bit of Both - depending on Situation
Do you prefer indoors or outdoors?	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:	Mom - Irish, dad - Italian
Language spoken for mother and father:	Mom - Afrikaans and English, dad - Afrikaans, English and Italian
Professions for mother and father:	Mom - HR, dad - CEO of car brand
Achievements on an academic level for mother and father:	Mom - matric, dad - degreed
Race for mother and father:	Both white/ caucasian

Eye colour for mother and father: Height for mother and father: Mother and father build: Any specific defining traits for both parents: Are your parents still alive? Yes to Both If deceased, cause of death: Age (if living, or age deceased): Health status: Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, 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 None	Natural hair colour for mother and father:	Brunette
Height for mother and father: Mother and father build: Any specific defining traits for both parents: Oriental eyes Are your parents still alive? Yes to Both If deceased, cause of death: Not applicable Age (if living, or age deceased): Health status: Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? 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 None		Brunette and green
Any specific defining traits for both parents: Are your parents still alive? If deceased, cause of death: Age (if living, or age deceased): Health status: Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? 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, bi polar, psychiatric illness in siblings or family? 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 None		
Are your parents still alive? If deceased, cause of death: Age (if living, or age deceased): Health status: Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None	Mother and father build:	Mom - petite, dad - athletic
If deceased, cause of death: Age (if living, or age deceased): Health status: Excellent Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None	Any specific defining traits for both parents:	Oriental eyes
Age (if living, or age deceased): Health status: Excellent Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None Any skin disorders, albinism, ectodermal dysplasia or other in your family — please explain: Any other comments regarding any health None	Are your parents still alive?	Yes to Both
Health status: Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? Any fertility problems in your family: None 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None	If deceased, cause of death:	Not applicable
Please indicate if any twins in your family: Any family members who have had cancer including aunts or uncles? 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None	Age (if living, or age deceased):	45 and 46
Any family members who have had cancer including aunts or uncles? 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None	Health status:	Excellent
including aunts or uncles? 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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: None None None None None None None	Please indicate if any twins in your family:	Yes cousins and grandfather
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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected Any skin disorders, albinism, ectodermal dysplasia or other in your family – please explain: Any other comments regarding any health None		None
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, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected None None None None None None None Any skin disorders, albinism, ectodermal dysplasia or other in your family – please explain: Any other comments regarding any health	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 disorders including genetic depression, bi polar, 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 None	from/currently have any health concerns/diseases including but not limited to diabetes, cholesterol, blood pressure, thyroid, haemophilia, blood clotting, paralysis, porphyria,	None
disability or learning disorders including genetic depression, bi polar, psychiatric illness in siblings or family? If yes, please state: Any physical deformities or handicaps? If yes, please state: History of asthma: Not Selected Any skin disorders, albinism, ectodermal dysplasia or other in your family – please explain: Any other comments regarding any health None	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: Any skin disorders, albinism, ectodermal dysplasia or other in your family – please explain: Any other comments regarding any health None	disability or learning disorders including genetic depression, bi polar, psychiatric illness in	None
Any skin disorders, albinism, ectodermal dysplasia or other in your family – please explain: Any other comments regarding any health None		None
dysplasia or other in your family – please explain: Any other comments regarding any health None	History of asthma:	Not Selected
, , , , , , , , , , , , , , , , , , , ,	dysplasia or other in your family – please	None
aspesse in your raining.	Any other comments regarding any health aspects in your family:	None
Alcoholism/substance abuse: No To Both	Alcoholism/substance abuse:	No To Both

https://baby2mom.co.za	2025-11-04 16:16:42
Grandmothers still alive?	Unanswered
If deceased, state cause of death:	Unknown
Current age or age of death:	Unknown
Grandfathers still alive?	Yes to Both
Current age or age at time of death:	Unknown
Grandfathers' eye colour (maternal and paternal):	Green
Grandmothers' eye colour (maternal and paternal):	Brown
Grandfathers' hair colour (maternal and paternal):	Brunette
Grandmothers' hair colour (maternal and paternal):	Red
Health of grandmothers (maternal and paternal):	Unknown
Health of grandfathers (maternal and paternal):	Healthy
Please specify if the race of your grandparents is different to yours. If mixed race, please specify race for maternal and paternal grandparents:	All caucasian
Any genetic health or psychological concerns worth noting regarding your grandparents:	My grandmother struggles with her kidneys
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:	

Confirmation

I have only made myself available as an egg donor with baby2mom:	Yes
Please advise any specific donation criteria other than those mentioned:	None

All information provided is correct and pictures are all of me. I agree to keep baby2mom updated with the donor program (screening, blood tests, scans, egg retrieval). I will keep baby2mom updated regarding my availability and regarding egg donation pregnancies achieved. I consent to participate in the baby2mom egg donor program 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 synchronize 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:

Yes