



Tastes of Gratitude



Recipes that honor the gift of life

Project Description

Tastes of Gratitude is a community-driven tribute that celebrates the profound connection between the gifts of life, sight, and health and the meals that nourish our souls. This collection brings together recipes from donor families, living donors, transplant recipients, medical professionals, and advocates, weaving together the flavors of heritage with the stories of second chances. Each dish serves as a living memorial—honoring those who gave selflessly through organ, eye, and tissue donation while celebrating the vibrant lives made possible by their generosity. By sharing these recipes, we aim to transform the act of cooking into an act of remembrance and gratitude, proving that while a life can be saved by a single gift, a legacy is tasted in every bite shared at the table.

Sharing a recipe is a personal way to tell a story. Whether you are honoring a loved one who gave the gift of life, celebrating your own journey as a recipient, or advocating for the cause, your voice belongs at our table.

We are honored to collect your stories and recipes during our open submission period from April 1 through August 31, 2026. Once the window closes, our team will begin the work of curating every recipe and narrative into a commemorative community cookbook. This collection will serve as a lasting tribute to the donation community, weaving together our shared experiences of loss, hope, and healing. By submitting a dish, you are helping us build more than just a book—you are helping us create a legacy that will inspire others for years to come.

Rules & Guidelines for Entry

- **Select Your Dish:** Choose a recipe that holds meaning for you. Perhaps it was a donor's specialty, your first meal post-transplant, or a family staple that provided comfort during grief or recovery.
- **Tell Your Story:** Use our submission form to share your connection to organ, eye, and tissue donation and what this recipe means to you.
- **Upload a Photo:** We love seeing the finished dish, or a photo of the person the recipe honors.
- **List Ingredients:** Please list measurements clearly (e.g., cups, teaspoons, grams)
- **Be Creative:** We accept all types of cuisine, from five-star meals to the simple secret for a perfect cup of tea. Feel free to submit whatever is personal to you, from appetizers to entrees, side dishes to dessert, drinks to snacks!
- To allow room for everyone, please try to limit yourself to, at most, 3 recipes per person.

Submission Process

- Recipes may be submitted electronically through our online form: www.DonateLifeNW.org/Cookbook
- If you prefer to mail your recipe in, you can send it to: Donate Life NW, PO Box 532, Portland, OR 97207
- All submissions must be submitted electronically or postmarked no later than Monday, August 31, 2026.
- Each recipe must have a submission form in order to be included.

For more information, contact Donate Life Northwest at 503-494-7888 or info@donatelifenw.org.



Submission Form

Please fill out the following information and include it with your recipe. If you are submitting online, you can fill this out with your online submission. If you are submitting multiple recipes (max of 3), please fill out a separate submission form for each recipe.

Your Information

Submitter's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Your Connection to Donation *Example: donor family member; heart recipient; living kidney donor; etc.*

The Story Behind the Dish

Food often connects us to the people we love. How does this recipe tie into your journey with organ, eye, or tissue donation? *Example: "This was my son's favorite meal," "The first thing I cooked after my transplant," or "A recipe that brought me comfort while waiting."*

Recipe Details

Recipe Name: _____

- Please attach your recipe, including ingredients and step-by-step instructions, to this form.
- Please include a photo of the finished dish and/or a photo of your loved one/yourself.

I authorize Donate Life Northwest (DLNW) and its partners to prepare, use, reproduce, publish, and exhibit the name, recipe, photo, and story in connection with traditional, digital, and social media advertising and marketing.

Signature: _____ **Date:** _____

If submitter is under the age of 18, signature of parent or guardian must be included for the submission.

Parent/Guardian Name (please print): _____

Parent/ Guardian Signature: _____ **Date:** _____

Please send recipes, photos, and the submission form to:

Donate Life Northwest
PO Box 532
Portland, OR 97207