

Chiles-Laman

FUNERAL & CREMATION SERVICES

"A family dedicated to service."

EMBALMING AUTHORIZATION

THE UNDERSIGNED REPRESENTS TO CHILES-LAMAN FUNERAL HOMES THAT THE UNDERSIGNED IS THE SURVIVING SPOUSE OR NEXT OF KIN OF _____ {THE DECEDENT} OR IS THE LEGAL REPRESENTATIVE OF SUCH PERSON, AND, AS SUCH, HAS THE PARAMOUNT RIGHT TO DIRECT THE DISPOSITION OF THE BODY OF THE DECEDENT.

THE UNDERSIGNED AUTHORIZES AND DIRECTS CHILES-LAMAN FUNERAL HOMES, IT EMPLOYEES, INDEPENDENT CONTRACTORS, AND AGENTS {INCLUDING APPRENTICES AND/OR MORTUARY STUDENTS UNDER THE DIRECT SUPERVISION OF A LICENSED EMBALMER}, TO CARE FOR, EMBALM, AND PREPARE THE BODY OF THE DECEDENT.

THE UNDERSIGNED ACKNOWLEDGES THAT THE AUTHORIZATION ENCOMPASSES PERMISSION TO EMBALM AT THE FUNERAL HOME OR AT ANOTHER FACILITY EQUIPPED FOR EMBALMING.

SIGNATURES

RELATIONSHIP TO DECEDENT

DATE: _____