



C.J. LaMarre & Co. Funeral Services

Licensed Under Associated Funeral Trade Services Inc.

Cremation Authorization

1. I, the undersigned authorize Corrine LaMarre/Funeral Director to cremate the remains of:

_____.

Late residence of the deceased: _____.

Who died on _____ 2020, at _____.

2. I solemnly declare that I have the right to authorize this cremation, and that I am the deceased's next of kin. Relationship: _____.
3. I further state that the deceased **has not** had implanted a heart pacemaker, radiation producing device nor any other life sustaining device that could be explosive. If any such device exists, I have instructed the funeral director to remove it before cremation. I also agree that in the event of my failure to notify the funeral director, I will be liable for any damages to the crematorium or injuries to persons.
4. I hereby certify that I have the right to authorize this cremation and the disposition of the cremated remains and I agree to hold the funeral director harmless from liability resulting from this authorization.
5. I order the following disposition, and agree to indemnify the company from any claim incurred in performing it.
6. I understand that by signing this document I am allowing Corrine LaMarre/Funeral Director of Associated Funeral Trade Services Inc. & C.J. LaMarre & Co. to proceed with cremation and that no viewing can occur after this document has been signed.

Signature: _____

Address: _____

Telephone: _____

WITNESS: _____

Name of Funeral Director: _____

Cremation #: _____