



Funeral And
Cremation
Services Inc.

8850 Ralston Road, Ste 203 Arvada, CO 80002

Phone 303-424-3092 Fax 303-420-2756

Email: info@blakecremationservices.com

RELEASE AUTHORIZATION

To: _____

I, the undersigned hereby acknowledge that I am the responsible next of kin of the decedent: _____. The relationship to the deceased is that of: _____. In that capacity, I the undersigned hereby authorize Blake Funeral and Cremation Services Inc., including its agents, to remove the deceased from your facility.

Printed Name of Next of Kin / Signature

Address: _____

Email: _____

Phone: _____

Date

Printed Name of Next of Kin / Signature

Address: _____

Email: _____

Phone: _____

Date

Arvada, CO

www.blakecremationservices.com