

CREMATION AUTHORIZATION

The undersigned hereby requests and authorizes Chadwick & McKinney Funeral Home Inc., in accordance with the laws for the State of Pennsylvania to cremate the remains of _____ who died on the _____ and to have the cremated remains to particles of uniform size. The undersigned certifies and represents that he or she has the right to authorize this cremation and agrees to hold Chadwick & McKinney Funeral Home Inc. & Ivy Hill Crematory harmless from all liability and expense including attorneys' fees that may incur as a result of its compliance with the request.

The undersigned assumes all responsibility for the cremation of the afore-mentioned remains and authorizes Chadwick & McKinney Funeral Home Inc. to make arrangements for said cremation.

X

Signature of Next of Kin/Legal Representative

Relationship/Authority to sign

Address X

The undersigned hereby requests and authorizes Chadwick & McKinney Funeral Home Inc. to return the cremations to the family members/persons designated below.

CREMAINS CAN ONLY BE RETRIEVED BY:

X

Signature of Next of Kin/Legal Representative

Signature of Funeral Director