

RECEIPT OF PET CREMATED REMAINS/URN/KEEPSAKES

The Undersigned have been identified in an executed Cremation Authorization and Disposition Form as an individual who is authorized to pick-up the cremated remains of:

_____ (“Pet’s Cremated Remains”) and/or the urn/keepsakes described as:

 _____.

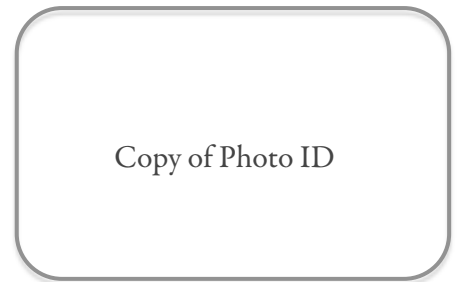
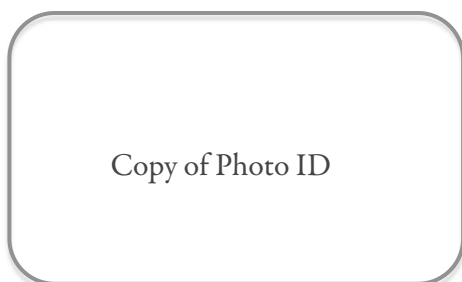
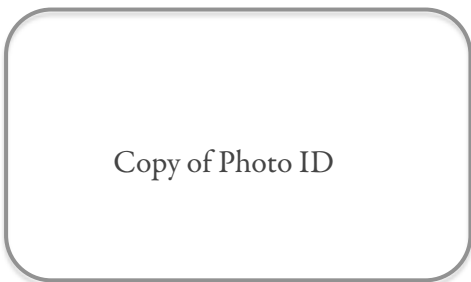
Undersigned has provided photo identification (see below) as proof of their identity.

Undersigned hereby assumes full responsibility and liability of the Pet’s Cremated Remains; releases _____ (funeral home); _____ (crematory); _____ (veterinarian); and their respective agents, officers, and employees from any liability or responsibility and hereby holds each of them harmless from any physical or mental injury resulting from, due to or while the Pet’s Cremated Remains are in their possession.

<u>NAME</u>	<u>RELATION</u>	<u>SIGNATURE</u> <small>(Do Not Sign Until Delivered)</small>	<u>DATE</u> <small>(Do Not Date Until Delivered)</small>

 Representative

 Date



NOTE: This sample form is a suggested guideline only. You are strongly encouraged to consult with your own legal counsel in the drafting, adoption and implementation of this or any form for your business.

Poul Lemasters, Esq., Lemasters Consulting, prepared this form for the benefit of ICCFA and its members and neither the author nor ICCFA warrant or guarantee the proper application of the information contained in this form.

If you have questions about this form or its use, you may contact Lemasters Consulting at info@LemastersConsulting.com or call at 513-407-8114.

If you have suggestions or requests for additional forms, you may contact ICCFA or email your suggestions/requests to forms@iccfa.com.