

WAIVER OF RIGHT OF DISPOSITION

1. **PARTIES:**

"FUNERAL HOME": _____
(Name of Funeral Home)

"REPRESENTATIVE": _____
(Name of Representative)

"DECEDENT": _____
(Name of Decedent)

2. **RELATIONSHIP OF REPRESENTATIVE:** The REPRESENTATIVE warrants and represents to the FUNERAL HOME that the relationship between the REPRESENTATIVE and the DECEDENT is as follows: (Check the appropriate box).

- Spouse
- Next-of-Kin (Closest Living Relative)
- Personal Representative of the Next-of-Kin with written authorization of Next-of-Kin to act on his or her behalf.
- Other: _____

3. **AUTHORITY OF REPRESENTATIVE:** The REPRESENTATIVE warrants and represents to FUNERAL HOME that the REPRESENTATIVE is the person or the appointed agent of the person who by law has the paramount right to arrange and direct the disposition of the remains of the DECEDENT and that no other person(s) has a superior right over the right of the REPRESENTATIVE.

4. **WAIVER OF DISPOSITION:** The REPRESENTATIVE waives and relinquishes the right to make and/or approve all arrangements concerning the disposition of the DECEDENT, including but not limited to funeral arrangements and the method of disposition. This waiver includes the relinquishment by REPRESENTATIVE of any and all rights to seek the recovery, possession, relocation or disinterment of the DECEDENT's remains, including cremated remains.

5. **NO LIABILITY FOR EXPENSES:** In providing this waiver, the REPRESENTATIVE is not accepting and will not be held liable for any expenses associated with the funeral and/or disposition of the remains of the DECEDENT. By signing this waiver, the REPRESENTATIVE is simply giving up any rights to direct the disposition, and is not assuming any obligation or liability to pay for the funeral or disposition expenses of the DECEDENT.

DATE:

SIGNATURE OF REPRESENTATIVE:
