



Cremation Authorization and Disposition

Notice: This is a legal document. It contains important provisions concerning cremation. Cremation is irreversible and final. Read this document carefully prior to signing.

I/We, the undersigned, certify, warrant, and represent that I/we have the full legal right and authority to authorize the cremation, processing, and disposition of _____ ("hereinafter referred to as the Deceased").

(name of the deceased)

I/We certify that we are related to the deceased as _____ I/We request and authorize **Dokken-Nelson Funeral Service & Crematory** (hereinafter referred to as the "Funeral Home") to take possession of and make arrangements for the cremation of the remains of the Deceased at Bozeman-Belgrade Crematory (hereinafter referred to as the "Crematory"). I/We hereby authorize the Funeral Home to arrange for the disposition of the cremated remains of the Deceased as follows:

I. FINGERPRINTS: Yes No I/We authorize the capture of digital fingerprints of the Decedent, to be stored in a secure location for the sole purpose of the families' ability to retain for a purpose of their choosing.

PIN # _____

II. SPECIAL HANDLING: Yes No Describe _____

III. Describe the URN: _____ **IV. CREMATION CONTAINER:** _____

V. FINAL DISPOSITION:

Deliver all of the cremated remains to _____ Cemetery.

Deliver or release all of the cremated remains to:

Name: _____ Relationship: _____

The cremated remains are to be divided into _____ portions which shall be placed into urns or other containers selected by the Authorizing Agent. Deliver to: _____

Mail the cremated remains using Priority Express Services through the U.S. Postal Service to:

Name: _____

Address: _____

_____ The Funeral Home and Crematory are not responsible for any damage or loss of cremated remains
(initials) shipped via Registered Mail with the United States Postal Service.

The cremation, processing, and disposition of the remains of the Deceased authorizing herein shall be performed in accordance with all governing laws, the rules, regulations, and policies of the Crematory and Funeral Home and the following terms and conditions:

1. The Crematory is authorized to remove and dispose of handles, ornaments and any other noncombustible items attached to the cremation container prior to the cremation. I/We further authorize the Funeral Home or Crematory to make disposition of any such noncombustible casket or container in any lawful manner it deems appropriate.

2. Mechanical, battery operated, or radioactive devices implanted in the remains of the Deceased (ie. pacemakers, defibrillators, cancer injection ports, etc.) will create a hazardous situation when placed in the retort. The Crematory will not cremate any human remains which contain any type of implanted mechanical or radioactive device. In the event the remains of the Deceased contain such a device, I/we hereby authorize the Funeral Home, its agents and employees, to remove any such mechanical, nonmechanical, or radioactive devices from the remains of the Deceased prior to commencement of the cremation process, and dispose of such items at its discretion.

I/WE HEREBY CERTIFY THAT THE REMAINS OF THE DECEASED DO ___ DO NOT ___ CONTAIN ANY TYPE OF IMPLANTED MECHANICAL, NONMECHANICAL OR RADIOACTIVE DEVICES.

Listed below are all implanted mechanical, nonmechanical, and radioactive devices such that the Funeral Home has been authorized to remove from the remains of the Deceased prior to commencement of the cremation and dispose of as follows:

_____ Describe implanted device

_____ Disposition of device

If no instruction is given for the disposition of the implanted devices the Funeral Home and Crematory reserve the right to dispose of such items at their discretion.

3. Certain items, including, but not limited to, body prosthesis, dental bridgework, dentures, dental fillings, jewelry, and other personal affects accompanying the remains of the Deceased, may be destroyed during the cremation process. I/We further authorize that if any items, other than the cremated remains of the Deceased, are recovered from the cremation chamber, they may be separated from the cremated remains of the Deceased and disposed of by the Crematory.
4. The cremation container containing the remains of the Deceased will be placed in the cremation chamber and will be totally and irreversibly destroyed by prolonged exposure to intense heat and direct flame. I/We authorize the Crematory to open the cremation chamber during the cremation process and reposition the remains of the Deceased in order to facilitate a complete and thorough cremation.
5. I/We hereby authorize the Crematory to separate and remove from the cremation chamber all noncombustible materials, including, but not limited to, hinges, nails, latches, dental gold, and precious metals, and to dispose of such materials.
6. Following the cremation process, the cremated remains of the Deceased, which consists primarily of bone fragments, will be mechanically pulverized to an unidentifiable consistency prior to placement into an urn or other recepticle. The minimum being a slide top urn.
7. In the event the urn or container is insufficient to accommodate all of the cremated remains of the Deceased, any excess cremated remains will be placed into a secondary container and returned to the family, together with the primary urn or recepticle.
8. I/We understand and acknowledge, that even with the exercise of reasonable care and the use of the Crematory's best efforts, it is not possible to recover all particles of the cremated remains of the Deceased, and that some particles may inadvertently become comingled with particles of other cremated remains remaining in the cremation chamber and/or other devices utilized to process the cremated remains. I/We hereby authorize the Crematory to dispose of any such residual particles in any lawful manner it deems appropriate.
9. Unless I/we give specific written instructions in this Authorization, the cremation, processing, and disposition of the remains of the Deceased will not be performed in accordance with any particular religious or ethnic customs.
10. In the event the cremated remains of the Deceased remain unclaimed for a period of 60 days, the Funeral Home shall give written notice to me/us by certified mail at the address(es) indicated below. I/We agree that in the event the cremated remains of the Deceased remain unclaimed for a period of 120 days after the date such written notification is mailed, the Funeral Home is authorized and directed to dispose of the unclaimed cremated remains and container in which they have been received, in any lawful manner it may deem appropriate. If disposal is by common burial all charges incurred, including but not limited to, cemetery and funeral home fees, for the disinterment and reinterment will be handled by the authorizing agent or their designee.
11. I/We agree to indemnify, release, and discharge the Crematory, Funeral Home, and its affiliates, agents, owners, directors, officers, shareholders, successors, employees, and assigns from any and all claims, demands, and/or causes of action, including but not limited to claims, demands, and/or causes of action for negligence arising out of or connected in any way with the cremations performed by the Crematory or Funeral Home. This release shall include but not be limited to any and all claims, demands, and/or causes of action based upon the Crematory or Funeral Homes reliance on the representations made by the undersigned and/or on the representations made in this authorization form. I/we further agree to defend and hold the Crematory, Funeral Home, and its affiliates, agents, owners, directors, officers, shareholders, successors, employees, and assigns harmless and to indemnify them for any and all liability, damages, costs, expenses, or legal fees arising out of claims, demands, and/or causes of action of any kind or nature made by any person or entity, including but not limited to any other members of the family and relatives of the decedent, which may be asserted against the Crematory or Funeral Home and may arise out of my/our failure to correctly identify the remains of the Deceased, disclose the presence in the deceased's remains of any implanted mechanical, nonmechanical, or radioactive devices, or take possession of or make permanent arrangements for the disposition of the deceased's remains.
12. Except as set forth in this Authorization, no warranties, expressed or implied, are made by the Funeral Home, Crematory or any of their respective affiliates, agents, or employees.
13. I/We also understand that this document does not contain a complete and detailed description of every aspect of the cremation process.

Signature of person(s) Authorizing Cremation and Disposition

I/We warrant that all representations and statements made herein are true and correct and that I/we have read and understand the provisions contained in this document.

Signature					
	Print Name		Relationship to deceased		
Address			Phone ()
	Street	City	State	Zip	
Signature					
	Print Name		Relationship to deceased		
Address			Phone ()
	Street	City	State	Zip	
Signature					
	Print Name		Relationship to deceased		
Address			Phone ()
	Street	City	State	Zip	
Witness:					Date
	Signature			Print Name	