

AUTHORIZATION TO PHOTOGRAPH THE DECEASED

Name of deceased: _____ Date of death: _____

The undersigned hereby represents and warrants to be the next of kin and/or the person(s) with the legal right to control the disposition of the above-named decedent and hereby authorizes the funeral home to photograph the deceased for the following purpose:

The undersigned agrees and understands the photograph(s) taken by the funeral home will be presented to the next of kin or the person(s) with the legal right to control the disposition, who will be asked to sign, date, and affix the time it was examined, for the purpose listed above, and that the photograph(s) will remain in the custody of the funeral home in the decedent's file on a confidential and permanent basis.

Additionally, except for the sole negligence or willful misconduct of the funeral home, it is agreed that the undersigned agrees to indemnify and hold harmless the funeral home, its affiliates, officers, directors, employees and agents from any and all liabilities, claims, losses, damages, costs, or causes of actions arising or relating in any manner from photographing the deceased for the above-listed purpose.

Signed this _____ day of _____, 20__ at _____.

Signature: _____

Relationship to the Deceased: _____

Signature: _____

Relationship to the Deceased: _____

Representative of Funeral Home: _____