

Private Cremation Authorization Form

Pet owner or Veterinary Clinic calls Companions Forever at **320-253-0022**

Companions Forever goes directly to your clinic or residence to transfer your pet to our facility.

We do not charge a transfer fee from pickup at local Vet Clinic/Pet Hospital, but there is a fee if picking up from residential home.

All Cremations, regardless of size or weight are done 100% privately, one-in-one-out & the ashes can be picked up within 24-36 hours of the cremation at Companions Forever Pet Cremation Service.

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| Pet's Name / Age / Weight: | Date Received: Time: <input type="radio"/> Home <input type="radio"/> Vet / Clinic <input type="radio"/> Brought in to CF | Ashes Returned: Time: <input type="radio"/> Home <input type="radio"/> Vet / Clinic <input type="radio"/> Picked up at CF |
| Pet Owner's Name & Other Family Members: | Type of Pet / Breed: Death Date: | Color of Pet: Gender: <input type="radio"/> Male <input type="radio"/> Female |
| City & State: | OFFICE USE ONLY Urn: 5" x 7": Clay Paw Print: Comfort Coin: Pet Items: <input type="checkbox"/> Blanket/Towel: _____ <input type="checkbox"/> Repeat Customer Referred by: <input type="checkbox"/> Google <input type="checkbox"/> Facebook <input type="checkbox"/> Other _____ | |
| Phone Number (Home & Cell): | | |
| Vet Clinic / Pet Hospital, if applicable (name, address, phone #): | | |

Authorization: This Authorization Form is required to be completed and signed prior to the final disposition of your pet. CREMATION IS AN IRREVERSIBLE AND FINAL PROCESS. It is important that you understand the cremation process and different options available prior to signing it. We want you to fully understand the information provided in this Authorization Form, so we will be pleased to answer any questions you may have. I/We represent that I/We have the right to authorize the cremation of the Pet's remains and warrant that I/we are the Owner or an Agent of the Owner.

Release and Certification: I/We agree to release and indemnify the Crematory, agents and employees, from any claim, liability, cost or expense resulting from the their reliance on or performance consistent with the directions, declarations, representations, authorizations and agreements herein. I/We agree that the Crematory's liability for negligent acts (of itself or its agents or employees) is limited to a refund of the cremation fees paid by me/us. I/We warrant that all representations and statements contained in this form are true and correct. I/We have read and understood this document.

Return: I understand I must pick up the ashes within 30 days. After such time, Companions Forever reserves the right to dispose of the ashes in a dignified manner when no provisions have been made.

Pet Disclosure: I/We further represent and warrant that the animal has not bitten any person or other animal during the past ten (10) days, is not suffering from Rabies, and has not been exposed to other animals suffering from Rabies.

Cremation \$ _____

Euthanasia \$ _____

Item(s) \$ _____

Signature of Pet Owner, or Authorized Representative

Tax \$ _____

Total \$ _____

Payment: Cash Check Card