

AUTHORIZATION TO PHOTOGRAPH

1. **PARTIES:**

“FUNERAL HOME”: _____
(Name of Funeral Home)

“REPRESENTATIVE”: _____
(Use Reverse Side for Additional Names) (Name of Representative)

“PHOTOGRAPHER”: _____
(Name of Photographer)

“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 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. **AUTHORIZATION TO PHOTOGRAPH DECEDENT:** The REPRESENTATIVE authorizes the FUNERAL HOME to allow PHOTOGRAPHER to photograph the DECEDENT for the following purposes (initial all lines that are applicable):

Initials

Reasons

For the purpose of identifying the DECEDENT
(Photograph to be maintained in FUNERAL HOME’s files)

Requested by REPRESENTATIVE solely for the following purpose(s)
stated fully below (**all prints to be provided to REPRESENTATIVE, who will be solely responsible for any further copies or use of all negatives, digital images, photographs or other prints taken by PHOTOGRAPHER**):

5. **INDEMNIFICATION:** The REPRESENTATIVE and PHOTOGRAPHER, individually and in their respective capacities to the DECEDENT, agree to indemnify and hold harmless the FUNERAL HOME from any claims or causes of action arising or related in any respect to the following: (1) the directions to take photographs of the DECEDENT; (2) actions involved in taking photographs of the DECEDENT, and (3) the distribution or other use of the photographs, images or other reproductions or prints by the REPRESENTATIVE or his or her attorneys, agents, or other representatives.

DATE:

SIGNATURE OF REPRESENTATIVE:

Name of Representative (Print)

DATE:

SIGNATURE OF PHOTOGRAPHER:

Name of Photographer (Print)