

**DIRECTION TO ARRANGE DONATION
OF REMAINS TO A TISSUE BANK**

1. **PARTIES:**

“FUNERAL HOME”:
(Name of Funeral Home)

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

“TISSUE BANK”:
(Name of Tissue Bank, Medical School, or Other Organization Receiving Remains)

“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. **ADVISORY.** The REPRESENTATIVE has selected the TISSUE BANK and acknowledges that the FUNERAL HOME has advised REPRESENTATIVE that tissue banks that handle non-transplantable tissue are largely unregulated by the government. The REPRESENTATIVE further acknowledges that FUNERAL HOME in no way endorses or recommends the TISSUE BANK and makes no representations and assurances regarding the handling and ultimate disposition of DECEDENT’s remains by the TISSUE BANK.

5. **DIRECTION TO ARRANGE AND CARRY OUT DONATION OF REMAINS:** The REPRESENTATIVE directs and authorizes the FUNERAL HOME to carry out the donation of the remains of the DECEDENT to the TISSUE BANK. In directing and authorizing the donation, the REPRESENTATIVE understands that the FUNERAL HOME will have no further responsibility for the proper handling and disposition of the remains after such donation.

6. **INDEMNIFICATION.** The REPRESENTATIVE agrees to indemnify and hold harmless the FUNERAL HOME from any claims or causes of action arising or related in any respect to the decision of the REPRESENTATIVE to donate the remains of the DECEDENT to the TISSUE BANK.

DATE:

SIGNATURE OF REPRESENTATIVE

ADDITIONAL REPRESENTATIVES

<u>Name</u>	<u>Relationship to Decedent</u>	<u>Signature</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____