Mercadante
Pet Cremation Care
Est. 2018

Because Pets are Family too…

370 Plantation Street
Worcester, MA 01605
800-854-0486

PET CREMATION AUTHORIZATION

OWNER INFORMATION

Pet Owner:_____

Address: _____

City/State/Zip: _____

Telephone:_____ ☐ Cell ☐ Home ☐ Work

Email: _____

PET INFORMATION

Pet's Name:_____

Species: (check one): ☐ Dog ☐ Cat ☐ Other: _____

Breed: _____ Gender: ☐Male ☐ Female

Weight: _____ Age: _____ Color: _____

Date of Birth: _____ Date of Death: _____

1. **Cremation Authorization**: The Owner or Legal Representative hereby authorizes Final Gift Memorial Center to arrange the cremation of the remains of the Pet at their facility. In providing this authorization, the undersigned represents that he or she is the Owner or the Legal Representative of the Owner and has the full right and authority to arrange the cremation and disposition of the cremated remains.

2. **Cremation Process**: The undersigned acknowledges that due to the nature of the cremation process, any material on the remains of the Pet, such as collars, tags, etc., will be destroyed if not removed. Accordingly, the undersigned understands it will either be destroyed or removed and disposed of by the Crematory.

3. **Type of Cremation**: ☐Private Cremation We only offer our services with individual cremations, not communal cremations (where several pets are cremated together).

4. I warrant and state that the animal named herein does not have rabies, has not bitten any human in the past ten days, or has not been exposed to any other animal with rabies in the past ten days.

5. **Unclaimed Remains**: I/We understand and acknowledge that if my pet's cremated remains go unclaimed for a period of 90 days after the cremation, they may be disposed of in a dignified and non-recover-able manner, such as scattering.

6. **Certification**: The undersigned certifies the accuracy of all information on this Authorization and will indemnify and hold harmless Mercadante Funeral Home their owners, employer, and agents, from any liability, cost, expenses, or claims resulting from this Authorization and release thereon. No warranties, expressed or implied, are made and damages, if any, shall be limited to the amount of the cremation fee paid to Mercadante Funeral Home.

Signature of Owner or Legal Representative:_____Date: _____

Pick-up: ☐ Removal from Residence* ☐ Veterinary Hospital: * _____
☐ Family to bring to funeral home Schedule Date: _____ Time: _____ : _____ ___M

Services & Memorial Items:

- ☐ Private Cremation (0-3 lbs.)
- ☐ Private Cremation (4-19 lbs.)
- ☐ Private Cremation (20-49 lbs.)
- ☐ Private Cremation (50-74 lbs.)
- ☐ Private Cremation (75-99 lbs.)
- ☐ Private Cremation (100-149 lbs.)
- ☐ Private Cremation (150-200 lbs.)

- ☐ Fur Clipping*
- ☐ Paw Print:* Ink Clay Frame
- ☐ Nose Print:* Ink Frame
- ☐ Large Frame* Paw/Fur Nose/Fur
- ☐ Memorial Candle*
- ☐ Clay Print w/Photo Frame Urn*
- ☐ Urn: ☐ Black ☐ Mahogany — Blue Metal Tan Metal Tube — Carved Bamboo Cedar

- ☐ Engraving* _____
- _____
- _____
- ☐ Upgrade Urn* _____
- _____
- _____

Transfer of pet to Mercadante Funeral Home:
Date:_____ Time: _____: _____ ____ M MFH Representative: _____

Date of cremation: _____ Date/Time of Retrieval Call: _____ Initials: _____

The recipient hereby acknowledges receipt of the cremated remains of the pet listed above, from Mercadante Funeral Home.

Date:_____ Time: _____ : _____ ____ M Signature of Owner or Legal Representative: _____

Funeral Home Representative: _____

Cremation Fee: $_____ Transfer Fee(s): $_____ Additional Fees: $_____ Total: $_____

Date Paid: _____ Amount Paid: $_____ ☐ Paid in full

☐ Cash Check #:_____ Credit Card Type:_____ Last 4 Digits_____

***Additional fees do apply**

White: MFH Yellow: Pet Parent