



**Sveta Gora Serbian Orthodox Funeral Home**

**AUTHORIZATION FOR RELEASE AND EMBALMING**

The undersigned hereby authorize

Name of Institution or Person: \_\_\_\_\_

To release the deceased human remains of: \_\_\_\_\_

(Deceased)

To SVETA GORA SERBIAN ORTHODOX FUNERAL HOME and its appointed agent and authorize said funeral home to care for, embalm and otherwise prepare said body for burial and/or other disposition.

I (We) hereby represent that I am (we are) of the same and nearest degree of relationship to the deceased and/or are legally authorized or charged with the responsibility for such burial and/or other disposition.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship to Deceased

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship to Deceased

Witnessed by: \_\_\_\_\_

Date: \_\_\_\_\_

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