# Coleman Funeral Home
## Authorization to Prepare and Embalm

Permission to embalm Yes _____ No _____

The undersign herby authorized and requests our firm including its agents and employees to embalm, and prepare of or disposition the remains of _____ (hereafter know as the deceased) with its customary practices. The undersign represents that he/she has all legal authority to take this action and agrees to indemnify and hold harmless this firm, their agents, and employees from any and all liability or claim therefore which may arise as a result of this authorization of any action in accordance herewith.

X _____ _____ _____

*Signature* *Date* *Relationship*

X _____ _____

*Witness* *Date*