



## Assignment of Authority

**PLEASE COMPLETE WHERE INDICATED. SIGN IN THE PRESENCE OF A NOTARY PUBLIC**

I, \_\_\_\_\_, the undersigned, hereby certify and represent that I am the  
(FULL NAME OF NEXT OF KIN)  
surviving \_\_\_\_\_ of \_\_\_\_\_ ("the Deceased"),  
(RELATIONSHIP TO DECEASED) (FULL NAME OF DECEASED)

and I hereby authorize Avatar Cremation Services to cremate his / her remains in accordance with Florida law and I designate \_\_\_\_\_, to handle all arrangements with Avatar Cremation Services, including the disposition of the Deceased's cremated remains, on my behalf with the understanding that

I  will  will not (*check one*) accept financial responsibility for the cremation and any related expenses.

I agree to indemnify, release and hold the Avatar Cremation Services, the crematory, their affiliates and assigns, harmless from any and all loss, damages, liability or causes of action (including attorneys' fees and expenses of litigation) in connection with the cremation and disposition of the cremated remains of the Deceased or my assignment of this authority to the above named person.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE SIGNED

### NOTARY REQUIRED

The foregoing instrument was sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ by \_\_\_\_\_,

who is/are personally known to me or who has/have produced the following as identification:

Type of Identification : \_\_\_\_\_

\_\_\_\_\_  
Signature of person taking acknowledgement  
Notary Seal (Rubber Stamp and Expiration)

**Please fax back to (561) 228-0657 and mail the original to:  
Avatar Cremation Services, 818 US Highway 1 Ste 4, North Palm Beach FL 33408**