

Pet Release/Authorization for Final Arrangements

Dream Land is unable to proceed with cremation without signature for authorization.



PET PARENT INFORMATION

Name _____
Address _____
City _____ St. _____ Zip _____
Phone (____) _____ (____) _____
Email* _____

PET INFORMATION

Pet's Name _____
ID Tag # for Private Cremation _____
Pet Type _____ M F
Date of Passing ____/____/____ Weight _____
How did you hear about us? _____

CREDIT CARD INFORMATION (Required for Cremation)

Card Type: _____ Visa _____ MC _____ AMEX _____ Discover _____
Card # _____ Exp: _____ Sec Code: _____

FINAL ARRANGEMENTS (Required for Cremation)

I authorize the Private Cremation of my baby, and request a Ceramic Paw Print, Fur Clipping, and Memorial Page. I have read the authorization on the reverse side of this form and agree with the terms of service.

Owner's Signature _____ Date _____

- Dignity Package Devotion Package Tribute Package
- Urn Memorial Plaque Name Plate
- I do not want a paw print I do not want fur clippings

*We offer a wide selection of other Memorial Products available for viewing on our website
Courier to vet office available for additional charge*

**Note: Collars, blankets or any other personal items cannot be returned.*

Additional Notes _____

OFFICE USE: ADDITIONAL NOTES

I have authorized Dream Land Pet Memorial Center, LLC (DLPMC) and/or one of its affiliated companies to care for my pet as indicated on the reverse side of this page.

I understand that this will be a private cremation that will include my pet having a unique identification number and tag that will accompany my pet throughout the removal and cremation process to insure the integrity of the private cremation. I understand that DLPMC will hold the cremated remains for no less than thirty (30) days, during which time I or someone on my behalf will retrieve them or arrange for their return. If no arrangements are made for the final disposition, release or shipment of the cremated remains, or if DLPMC is unable to contact me using the information I have provided, I agree that DLPMC shall have the right to send the cremated remains to the address listed on the reverse side of this page at the expense of the owner or DLPMC reserves the right to scatter my pet's ashes in a respectful manner.

I hereby release and shall indemnify and hold harmless DLPMC and its successors, assigns, sister, parent and subsidiary companies and their respective officers, directors, shareholders, employees and agents from any and all liability, claims, suits and damages arising from or relating to the handling, cremation and release of my pet.

I understand and agree that DLPMC's liability arising under this agreement shall be limited to and shall not exceed the amount paid by me to DLPMC and, further, that DLPMC shall not be responsible for any indirect, incidental, special or consequential damages I may suffer or claim, including without limitation damages for emotional distress. I acknowledge that DLPMC shall not be liable for any loss or delay resulting from any events outside of its control, including without limitation acts of God, fire, national disaster, terrorism, war or labor stoppage.

I agree that this authorization form shall be governed by the laws of Cobb County Georgia. In the event DLPMC or its representatives have to initiate a collections action against me, I agree to pay the costs of collection, including attorneys' fees.