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DESIGNATION OF AGENT TO COMPLETE ARRANGEMENTS

Complete this form only if you wish to appoint someone else to make arrangements.

I, _____ (*Print Full Name*) am the

(specify relationship) of the
following decedent:

Full name of deceased

I hereby designate _____
Print Full Name of Designee

as my agent to make all cremation/funeral/cemetery arrangements, including disposition of cremated remains, on my behalf with full authority as if I were making those arrangements myself.

I further waive my rights, as immediate next-of-kin of the above-named decedent, with regards to all cremation/funeral/cemetery arrangements, including disposition of cremated remains.

I understand that this waiver is irrevocable.

I also understand that giving this waiver, I am not responsible for expenses my agent incurs in making cremation/funeral/cemetery arrangements, including disposition of cremated remains.

Witness my signature as legal authorization, this _____ day of _____, 20____

X _____

Witnessed by: _____

Print Name: _____

Accepted by: _____