

**Measurements:**

Collection Date:

Collection Team:

**Packages**

Direct Cremation

Direct Burial

Coffin:

Economy

Coffin:

Traditional

Coffin:

Signature

Coffin:

Premium

Casket:

**Deceased Patient Information**

Surname:

Name:

Date of Birth:

Date of Death:

Age:

Home Address:

Place of Death:

Deceased Patient Size:

Small

Medium

Large

XLarge

XXLarge

XXXLarge

XXXXLarge

Church of Choice:

Pastor of Choice:

Pastor Contact Number:

Pastor Contact Email:

Burial

Cemetery of Choice:

Date of Choice:

Cremation

Crematorium of Choice:

Date of Choice:

Repatriation

Country of Choice:

Date of Choice:

**Funeral Director Information**



**ABNEY**  
Funeral Services

182 STOKE NEWINGTON HIGH STREET  
STOKE NEWINGTON  
LONDON, N16 7JD

M: 07484 812 984  
T: 0207 923 7111  
E: daniel@abneyfunerals.com

**Collection Address**

Full Address:

Telephone:

**Next of Kin Details**

Full Name:

Relationship to Deceased:

Telephone:

Email:

Address:

**Declaration**

We, the above named family, have given permission and instructed our chosen funeral director, Abney Funeral Services to transfer the above named deceased person and any remaining personal effects, into their care, for the purpose of funeral preparations

Date:

Print Name:

Digitally Signed By:

## Funeral Director's Authorisation

\*I/We:

Of (Address):

Hereby do confirm  
that \*I am/We are the

Next-of-Kin

Executor

Creditor

Person Responsible

For the Late/Estate of The Late (Name of Deceased):

Of (Last Address):

Who died on:

At (Place of Death)

\*I/We also confirm that \*I/We have this

Day:

Month:

Year:

Given \*My/Our authority to Abney Funeral Services to undertake all arrangements necessary or reasonably incidental thereto and to enter into contract with other persons on \*My/Our behalf for the Burial or any other services requested by \*Me/Us with regards to the Late:

\*I am/We further agree to be jointly and severally responsible for the payment of all expenses incurred by Abney Funeral Services in respect of the burial, or other lawful disposal of the deceased. This payment must be made no later than Seven (7) working days prior to the day of the funeral.

Abney Funeral Services reserve the right to commence or decline any part or all of the services requested by \*Me/Us unless this authorisation is duly signed by the person(s) accepting this agreement or intending to enter into legal relations with Abney Funeral Services.

It is agreed and understood that Abney Funeral Services will not be liable for any cost, damages, for negligence, emotional distress or otherwise which are unforeseeable and flow from the failure of any florist, printer or any other external service provider, or any carrier, whether by sea, air, or land, to transport any body within the United Kingdom or from the United Kingdom to any other country according to its schedule, charter or agreed contract dates for shipping and / or carriage of any body. It is further understood that \*I/We:

Hereby appoint Abney Funeral Services to be \*My/Our agent in all dealings with third parties, in all matters relating to the Burial or other legal means of disposal of the human remains of

the Late:

**Abney Funeral Services will only be answerable or liable to the person or persons entering into this agreement**

Signed by:

Date:

Next-of-Kin/ Executor/ Person Responsible

Print Name:

# *Embalming Authorisation*

## 1. PARTIES

Name of Funeral Home:

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Name of Representative:

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Name of Deceased:

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## 2. REPRESENTATIVE AND RELATIONSHIP TO THE DECEASED

The REPRESENTATIVE warrants and represents to the ABNEY FUNERAL SERVICES that the relationship between the REPRESENTATIVE and the DECEASED is as follows (tick appropriate statement):

- Spouse
  - Next of Kin (closest living relative)
  - Personal Representative of Next of Kin with written authorisation of Next of Kin to act on his or her behalf.
  - Other (Please state):
- 

## 3. AUTHORITY OF REPRESENTATIVE

The REPRESENTATIVE warrants and represents to the ABNEY FUNERAL SERVICES that the REPRESENTATIVE is the person or the appointed agent of the person who by law has the paramount right to arrange and direct the disposition of the remains of the deceased and that no other person(s) has a superior right over the right of the REPRESENTATIVE.

## 4. EMBALMING AUTHORISATION

The REPRESENTATIVE authorises and directs the ABNEY FUNERAL SERVICES, its employees, independent contractors and agents (including apprentices and/or mortuary students under the direct supervision of a licensed embalmer) to care for, embalm, perform restorative measures and prepare the body of the DECEASED. The REPRESENTATIVE acknowledges that this authorisation encompasses permission to embalm at the funeral home facility or at another facility equipped for embalming. In providing this authorisation, the REPRESENTATIVE acknowledges that embalming is not an exact science and that results may be adversely impacted by a number of factors, including, but not limited to, the conditions under which the death occurred; time lapse between death and the onset of the embalming procedure; physical condition at the time of death; medicines, especially analgesic administered prior to death; life saving procedures; cause of death; storage procedures of the releasing intuition; natural elements; tissue/organ donations; and post-mortem (autopsy) examinations.

Signature of Representative:

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Date:

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