



AUTHORITY TO RELEASE DECEASED BODY

To: The Medical Superintendent of the	Hospital.
I,	being the personal representative/senior
available next of kin and the person respons	ible for making funeral arrangements for the
late	authorise
CHILDERS WOODGATE FUNERAL SER	VICES to take possession of the body of the
deceased for the purpose of conducting funer	ral arrangements.
Signed:	
Print name:	
Date:	
(e.g. interstate), then a Justice of the Peace w person(s) to remove the deceased may sign in to remove the deceased's body	or available next of kin is not available to sign who has received verbal instructions from that their absence to confirm the authority granted
Signed:	
Print name:	
D .	