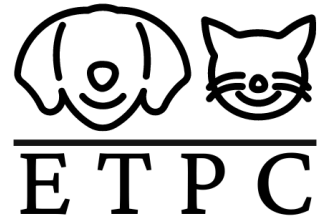


EAST TEXAS PET CREMATORY

DBA Boren-Conner Funeral Home, Inc.

550 S. Doctor M. Roper Pkwy
Bullard, TX 75757
Phone (903) 894-7777



PET CREMATION AUTHORIZATION - VETERINARY CLINIC FORM

Name of Clinic: _____

Name of Pet: _____ Date: _____

Breed: _____ Gender: _____ Weight: _____ lbs

Name of Owner: _____ Phone: _____

Address: _____

URN ENGRAVED:

YES (name): _____

NO

CLAY PAW PRINT:

YES

Name on Clay: Yes or No

NO

TYPE OF CREMATIONS

_____ Private Cremation

_____ Memorial Cremation

Cremation Authorization:

The owner hereby authorizes East Texas Pet Crematory to arrange the cremation of the remains of the pet at their facility. In providing this authorization, the undersigned represents that he or she is the owner or the legal representative of the animal and has full right and authority to arrange the cremation and disposition of the cremated remains.

Cremation Process:

The undersigned acknowledges that due to the nature of the cremation process, any material on the remains of the pet, such as collars, tags, etc. will be destroyed if not removed. Accordingly, the undersigned has removed any such material or, if the material is present on the pet's remains, the undersigned understands it will either be destroyed or removed and disposed of by the crematory.

Signature of Owner or Legal Representative: _____