



DNA RETRIEVAL RELEASE OF LIABILITY FORM

The Crematory Official signed below has provided information that I/we acknowledge that any and all DNA material will be destroyed during the cremation process of _____

As such,

_____ I/we direct and authorize Eastgate Funeral Home/All Texas Cremation to retrieve a cheek swab/hair sample and process a sample of the decedent's DNA prior to the cremation process – **(\$295)**

_____ I/we decline the opportunity to retrieve and store the decedent's DNA material and agree to hold East Gate Funeral Home and its agents harmless for the destruction of all DNA material.

Signed this day ____ of _____, 20____.

Authorizing Agent Signature (Please print and sign)

East Gate Funeral Home Official (Please print and sign)