



Interment Authorization for Relative

This form is to be used when the original lot owner(s) are deceased and children of the original owner(s), or currently interred deceased need to authorize an interment into a grave. Each individual child of the lot owner, or currently interred deceased, must sign an authorization form, which must be submitted to the cemetery office prior to interment.

Date: _____

Funeral Home: _____

Funeral Director: _____

Deceased Name: _____

Date of Interment: _____

Grave Location: _____

Section/Lot/Row: _____

Grave Number: _____

I, _____ (Please Print), _____, (relation)
to the original lot owner(s) or current interred deceased individual(s):

Give full authorization to inter the aforementioned deceased, to be interred in the aforementioned gravesite. I understand that in order to have the interment take place in this gravesite all of my other living siblings must also complete an additional copy of this form including their signature. My living siblings are as follows:

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

I also agree that I will not hold Arlington Cemetery Association responsible for any issues, damages, or other indemnification on the basis of this authorization for interment in the case that any of the information included in this authorization is falsified. I take full responsibility and ownership of my statements made in this authorization.

Signature – Child

Date

Signature – Funeral Director or NOTARY

Date