

DECLARATION OF INTENT REGARDING CREMATION
OF

(Print Full Name of Person)

To my family and all those concerned with making decisions and arrangements upon my death. I, _____ direct that my body be cremated after my death. I appoint the following Authorized Agent to act on my behalf to carryout my arrangements.

Authorized Agent _____

(Print Full Name)

Address _____ Relationship _____

City/State/Zip _____ Telephone _____

Note: *The Authorized Agent can be your spouse, domestic partner, child, parent, sibling, relative or friend.*

- ◆ **Declaration of Intent:** I, _____, a resident of the Commonwealth of Massachusetts, being of sound mind and legally competent, do hereby direct that upon my death, my body be cremated pursuant to the laws of The Commonwealth of Massachusetts and do further direct that all those authorized to make decisions with respect to the disposition of my remains take all legally permissible action to effect my wishes as set forth herein, including without limitation, the execution of a written Cremation Authorization form if so necessary.
- ◆ **Effect:** This Declaration of Intent Regarding Cremation shall take effect only when manually signed by me and notarized below. This Declaration of Intent Regarding Cremation shall be deemed to express my conclusive wishes unless revoked by me at any time while I am legally competent. Such revocation may be made by me in writing and notarized or be made by me orally in the presence of two (2) disinterested witnesses who each shall have affirmed in writing that such oral revocation has been made by me.
- ◆ **Acknowledgement:** I understand that due to the nature of the cremation process, any prosthesis or valuable material, including without limitation, dental gold, either will be destroyed or will not be recoverable. These by-products of cremation will be disposed of by Mount Auburn Cemetery in any manner it sees fit.
- ◆ **Site of Cremation:** I hereby request that my body be cremated at Mount Auburn Cemetery.
- ◆ **Urn or other Container:** I hereby request that my cremated remains be placed in an urn which:
 - I have purchased and it is located _____; or
 - Is to be selected by those making arrangements pursuant hereto.

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- ◆ **Interment:** I understand that cremation alone does not provide for the interment of my cremated remains.
 - I have purchased interment space at Mount Auburn Cemetery (Lot _____, Grave _____, Location _____, Niche _____) and direct that my cremated remains be interred therein; or
 - I otherwise have provided, or will provide, for interment space to be purchased on my behalf at Mount Auburn Cemetery and wish that such space be purchased by my estate as administrative expense if I have failed to purchase such space prior to my death.
- ◆ **Other:**
 - I direct that _____ be given custody of my cremated remains in accordance with this Declaration of Intent Regarding Cremation.
 - I hereby bequeath the sum of _____ dollars or _____ % of my estate (*or description of other securities or property*) to the Friends of Mount Auburn Cemetery, 580 Mount Auburn Street, Cambridge, MA 02138. For more information or to learn other ways to make an estate gift, please call Jane Carroll, Vice President of Development at 617-607-1919.
- ◆ **Authority:** I understand that the final determination of my cremation is the sole decision of my **Authorized Agent**. This Declaration of Intent Regarding Cremation creates no duty or obligation upon Mount Auburn Cemetery, its Trustees, Officers, agents or employees.

IN WITNESS WHEREOF, I have set my hand and seal this _____ day of _____, 20__.

Print Name of Principal _____

Signature of Principal _____

Address _____ City _____

State _____ Phone _____

Commonwealth of Massachusetts

County _____

On this _____ day of _____, 20__ , before me _____, proved to me through satisfactory evidence of identification to be the person whose name is signed above, and acknowledged to me that s/he signed it voluntarily for its stated purpose.

Notary Public

Commission Expires _____

It is suggested that this Declaration of Intent Regarding Cremation be given to the person agent named above, the funeral director and the original copy to Mount Auburn Cemetery at time of death.