



# Midgley Gardenside Mortuary

Gentle Guidance Through The Storm  
FD-1557

## Release Authorization

Pursuant to your rules and regulations, I authorize the release of the Remains of:

\_\_\_\_\_

to **Midgley – Gardenside Mortuary**. I am the nearest next of kin to the decedent, and declare by my signature below that I have full right to authorize this release. I agree to hold harmless all parties involved in affecting this release, i.e., Gardenside Funeral Service, Inc., Midgley – Gardenside Mortuary, its agents, employees and representatives, the care facility, its agents, employees and representatives, and all other parties, of any and all liability.

This release also pertains to any personal belongings of the decedent.

**X**

\_\_\_\_\_  
Signature of Next of Kin

\_\_\_\_\_  
Printed Name of Next of Kin

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email address, if available

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Relationship to Decedent

\_\_\_\_\_  
Witness/Funeral Home Representative

\_\_\_\_\_  
Date of Signature

13450 Paramount Blvd.  
South Gate, CA 90280-8251  
Phones: (562) 630-3886  
(800) 795-0028  
Fax: (562) 633-4745

www.midgleymortuary.com  
midgleymortuary@aol.com

