



TRANQUIL TIDES PET AQUAMATION

Pet Aquamation Authorization & Release Form

If you have any questions, please email us at info@tranquiltides.life or call us at 417-830-4794. Please complete the following form to schedule a service call to your veterinary clinic, your home or if you are bringing your pet to us.

Pet's Name _____ Color of Pet _____

Type of Pet/Breed _____ Weight _____ Gender _____

Name of Owner _____

Owner's Address _____

City _____ State _____ Zip _____

E-mail _____ Phone Number _____

_____ I/We understand aquamation is an irreversible and final process. After thirty days, unless other arrangements have been made, any unclaimed remains will be disposed of in a dignified manner.

_____ I/We represent that I/We have the right to authorize the aquamation of the Pet's remains and warrant that I/We are the owner or an agent of the owner.

_____ I/We understand that due to the nature of the aquamation process, any possessions or materials, such as collars or tags, that are left with the animal will be removed prior to aquamation and disposed of by Tranquil Tides Pet Aquamation LLC.

_____ I/We further represent and warrant that the animal has not bitten any person or other animal within the last 10 days.

_____ I/We understand that payment will be made at time of pick-up of your pet from the vet/home or when you bring them to us by appointment.

Date of Passing/Scheduled Passing _____ Date of Birth _____

_____ If applicable, I/We authorize Tranquil Tides to pick up our pet at the veterinary clinic listed below. Please make sure they are aware that you would like to use our services.

Vet Clinic name _____ Phone number _____

Communal Aquamation: I/We elect NOT to receive my pet's ashes back to me and they will be spread with dignity in a private garden.

Individual Aquamation: I/We shall receive my pet's remains within 7-10 days. We will be in touch to help with your urn selection for your loved one.

The undersigned certifies the accuracy of all information on this authorization and will indemnify and hold harmless Tranquil Tides Pet Aquamation LLC, their owners, employees and agents from any liability, cost, expenses or claims resulting from this authorization and release thereon.

Owner/Authorizing Agent Name _____

Signature _____ Date _____