

THE COUNTY OF GALVESTON MEDICAL EXAMINERS OFFICE

6607 HIGHWAY 1764
TEXAS CITY, TEXAS 77591
(W) 409.935.9274 (F) 409.935.8305

AUTHORIZATION TO RELEASE BODY

FULL NAME of Decedent: _____

Age _____ First _____ Middle _____ Last _____
Race _____ Sex _____

Address of Decedent: _____

The LEGAL NEXT OF KIN to the decedent according to the priority order list below:

(Name of legal next of kin) (Relationship to decedent)

Address AND telephone number of legal next of kin: _____

I (we), being the legal next of kin according to priority list below, release the body to: _____

_____ Funeral Home.

Telephone # of F.H. _____ Fax # of F.H. _____

Address of funeral home: _____

Signature of Next of Kin: _____ Date: _____
(or person handling the remains)

Witness to signature above: _____ Date: _____
(funeral home representative)

With this signature, I attest and affirm that I (we), am (are) the legal next of kin according to the priority list below: Below is the law regarding the order of the next of kin when picking up the remains.

Priority Order of Next of Kin (Texas Health & Safety Code 711.002)

Please mark only the appropriate box to show priority order of next of kin.

1. Did the decedent have a person designated in a written instrument?
Agent of Disposition YES or NO
(If yes, attach the document(s) with the release form and fax it to us). If you answered no,
2. Did the person have a surviving spouse? YES or NO
(If yes, please have the spouse sign the release form and fax it to our office). If you answered no,
3. Does the decedent have a child 18 years or older? YES or NO
(If yes, please have the child sign the release form and fax it to our office). If you answered no,
4. Does the decedent have a surviving parent? YES or NO
(If yes, please have ONE of the parents sign the release form and fax it to our office). If you answered no,
5. Does the decedent have a sibling 18 years or older? YES or NO
(If yes, please have one of the siblings sign the release form and fax it to our office). If you answered no,
6. Did the decedent have any adult person in the next degree of kinship in the order named by law to inherit the estate of the decedent? YES or NO
(If yes, please submit the paperwork, attach it to the release form, and fax it to our office). If you answered no,
7. Is there a person/persons handling the remains other than the legal next of kin? YES or NO
(If yes, please have that person explain in a short letter the situation, sign our release form and fax them to our office).