

Funeral consent form for parents

This is to confirm that (name(s) of parent(s))

Have decided to have a funeral arranged for their baby

By **[Name of hospital/Trust/health board]** By private arrangement

Have not yet decided on a funeral for their baby but will contact the member of staff named below
by [date] to inform them of their decision.

[Amend the list below based on the locally available options for the baby's gestation]

Where **[Name of hospital/Trust/health board]** is to make the funeral arrangements, all available options have been fully explained and the parents have decided on:

Individual burial Shared burial Individual cremation
 Shared cremation Sensitive incineration Burial by parents at home

Staff have explained whether and when ashes will be available following a cremation.

An individual funeral A shared funeral Not to have a funeral

Parents have been informed that an **[individual/shared]** funeral will be provided by the hospital that is **[non-denominational/name of religion]**.

Parents have been offered information about additional options available to them (for example, they have been offered details about their options for a coffin, music, flowers, readings, etc.) and any related expenses have been explained. Include details below:

.....

Parents will attend the funeral **Parents will not attend the funeral and**
 Parents may attend the funeral have been informed of the details
 have declined information about the funeral

Parents are aware that the funeral will be held on [date] at [time]
at [location]

The baby will be transported to the funeral by:

The hospital A funeral director: The parents

Parent(s) name(s) (please print):

.....

Signature Signature

Date

Name of staff member (please print)

In case of need or concern please contact:

Staff member's name Job title

Department direct line Signature