

INTENDED ARRANGEMENTS
FOLLOWING THE DEATH OF A CHILD
This form to be filed in UR post collection

Date of Death	UR number Name DOB Address label
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RCH Staff member: _____ Contact no: _____

TO BE COMPLETED BY THE PARENT/GUARDIANS

<p>Funeral Director arrangements I authorise RCH to release my child's body to _____ (Name of nominated Funeral Director)</p> <p>Or: Nominated Funeral Director as yet undecided <input type="checkbox"/></p> <p>Signed: Mother / Father / Guardian : _____</p>
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<p>Parents/guardians wish to take their child home (Ensure families are provided with an information sheet titled: <i>Taking your child home – time together after death</i>)</p> <p>I have been informed of my legal obligations to ensure that the body must be buried or cremated. I will make the necessary arrangements.</p> <p>Signed: Mother / Father / Guardian : _____</p>
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To be completed by RCH Staff

Indicate any special arrangements with regard to the above, eg garments, mementoes to go with child, plans if funeral director undecided etc.
