



Serving Weirton and surrounding communities since 1922.

Fingerprinting Consent Form

Date: _____

The undersigned hereby represents and warrants to be the next of kin and/or the person with the legal right to control the disposition of the following decedent:

You, as the undersigned, authorize **Greco-Hertnick Funeral Home** to preserve the fingerprints of the deceased by means of digital scanning, and keep to them on file, for the purpose of identification and/or making keepsake jewelry/remembrances, etc. The fingerprints will not be used or disclosed by the funeral home without your authorization, unless disclosure is required by a court of law.

You hereby agree to release the funeral home from all liability and agree to indemnify and hold the funeral home harmless for any and all liabilities, obligations, losses, damages, costs, or expenses of any nature whatsoever relating to or arising from the above.

Signed this _____ day of _____.

Signature: _____

Relationship to Deceased: _____

