



**PATHWAY**  
PET FUNERAL SERVICES INC

**PATHWAY-PET FUNERAL SERVICES INC**

**289-314-5671**

**www.pathwaypet.ca**

**sharon@pathwaypet.ca**

Pet's First Name \_\_\_\_\_ Pet's Last Name \_\_\_\_\_  
 Owners's First Name \_\_\_\_\_ Owner's Last Name \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Email \_\_\_\_\_  
 Pet's Weight \_\_\_\_\_ M/F \_\_\_\_\_ Species \_\_\_\_\_ Pace Maker \_\_\_\_\_  
 Address \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Date of Death \_\_\_\_\_ Veterinary Clinic \_\_\_\_\_

Authorization for Disposition of Pet Remains by Pathway-Pet Funeral Services Inc.

Package A <b>Communal Cremation</b> (Ashes not returned)	0-45lbs-----\$95 +tax 46lbs and up-----\$135 +tax
Package B <b>Private Cremation</b> (Ashes returned in a scatter/burial box)	0-45lbs-----\$245 +tax 46lbs and up-----\$285 +tax
Package C <b>Viewing at the Pet Crematory</b>	Added to plan B -----\$150 +tax
Package D <b>Angel of Mercy</b>	Added to plans A or B--\$50 +tax
Package E <b>Pocket Pets</b>	Communal Cremation-\$65 +tax Private Cremation-----\$190+tax

Fur Clipping _____	(Complimentary-provided by Pathway upon request)
Urn _____	Ref. Number _____
Paw Print _____	Package Total _____
Keepsakes _____	Memorial Products _____
Jewelry _____	Sub Total _____
Personalization _____	Taxes _____
_____	Total _____

Method of Payment Credit \_\_\_\_\_ Debit \_\_\_\_\_ Cash \_\_\_\_\_ Chq \_\_\_\_\_ E-Transfer \_\_\_\_\_

Special Requests or Service Details \_\_\_\_\_

**Authorization** I understand that Cremation is an irreversible and final process, I hereby certify that I am the owner or authorized agent for the owner of the animal described above and I am 18 years or older. I hearby authorize the above method of disposition. I have read and understand the different methods of cremation and by signing below I authorize Pathway-Pet Funeral Services Inc. to proceed with my wishes.

Date \_\_\_\_\_ Signature of Owner or Agent \_\_\_\_\_

Date \_\_\_\_\_ Signature of Pathway-PFSI. \_\_\_\_\_