Novashare Donation, LLC

Whole Body Release form

I hereby release the body and I make this whole body anatomical gift to Novashare Donation for use in education, medical training or research studies determined by the program. This donation is made in accordance with the Revised Uniform Anatomical Donations Act, G.S. §130A-412.3 et seq and as authorized by North Carolina law, and will be used at Novashare's discretion.

I understand and accept the following:

- This donation is being made for medical training and research.
- I understand the length of the program is between 2 and 12 months.
- I understand that the body may be used to teach surgeons, emergency medical professionals, military training and trauma scenarios.
- Representatives from Novashare will be present at each training event to ensure proper etiquette and respect is given to the donor at all times.
- I authorize Novashare to cremate the body in accordance with G.S, 90-210.120.

Under oath and under penalty of perjury, I hereby affirm that, to the best of my knowledge and belief, there is no other person who has the prior right to grant this authorization to control the remains of the deceased named above. I hereby agree to hold harmless the Funeral Director, Crematory, Novashare or person acting as such, their officers and employees from any liability costs or expenses resulting from this authorization.

Name of Deceased:

I hereby certify that I am acting as the next of kin and I have the rights of disposition.

Signature: Date:

☐ I request that the cremated remains be returned to the following address: