



Western Australia

Anatomy Act 1930

Anatomy (Forms and Fees) Regulations 1933

Reprint as at 10 December 1999



Western Australia

Reprinted under the
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at 10 December 1999

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Anatomy (Forms and Fees) Regulations 1933

1. Citation

These regulations may be cited as the *Anatomy (Forms and Fees) Regulations 1933*¹.

[Regulation 1 inserted in Gazette 12 June 1992 p.2417.]

1a. Forms

The forms set out in Schedule A are prescribed as the forms to be used under the Act.

[Regulation 1a inserted in Gazette 12 June 1992 p.2417.]

[2 and 3. Repealed in Gazette 22 January 1999 p.213.]

Schedule A

[Forms A and B deleted]

Form B(1)

Anatomy Act 1930

To the Principal of the.....
School of Anatomy.

It is my wish that my remains after death be anatomically examined at the
.....School of Anatomy for the
advancement of medical education.

My personal particulars are: —

Full Name:

Usual Address:

Date of Birth:

Religious Persuasion:

Name and address of surviving spouse, if married:

.....

If unmarried, divorced, or widowed, name and address of nearest surviving relation
living in Western Australia:

.....

Preference as to disposal of remains (burial or cremation):

.....

I have/have not made a will. (Give name and address of executor if will made.)

Signature:

Witness (signature):

(Address):

Note. — Persons who offer their remains for anatomical examination should inform
their spouses, if married, or otherwise their nearest relations living in this State, of their
wishes and ask them to co-operate with the School of Anatomy. If a will has been made
it is important that the executor be informed also. A copy of this statement will be
supplied for filing with the will on request.

Form B(2)
Anatomy Act 1930

To the Principal of the
School of Anatomy.

In accordance with the wish expressed by the late
.....of.....
who died aton
I have arranged for his/her body to be delivered to you by
.....for anatomical examination.

Particulars of the deceased person are as follows: —

Full Name:.....

Usual Address:.....

Date of Birth:.....

Religious Persuasion:.....

Preference as to disposal (burial or cremation):.....
.....

Name and Address of executor or administrator of estate, if this advice is not completed
by the executor or administrator
.....

Name and address of surviving spouse or nearest surviving relation:.....
.....
.....

(Signature of Informant):.....

Status of Informant (Executor, Administrator,
surviving spouse, etc.):.....
.....

Date:.....

Note. — This form, together with a copy of the Death Certificate, should be delivered to
the School of Anatomy with the body.

If the surviving spouse or nearest surviving relation is available they should be
requested to complete and sign the following statement: —

I,.....of.....
being the surviving spouse/nearest relation, agree to the anatomical examination
of his/her body in accordance with his/her wishes.

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Schedule A

(Signature):.....
(Relationship):.....
(Address):.....
.....

Form C

Anatomy Act 1930

Notice to the Executive Director, Public Health and Scientific Support Services of the
intended Removal of a Body for the Purpose of Anatomical Dissection.

Date.....19.....

Sir,

I desire to inform you that it is my intention to remove to the.....
School of Anatomy the body of....., an inmate of.....,
who died here on....., at the hour of.....
Religious Persuasion of Deceased.....Sex.....Age.....

During life * he/she has never expressed to me, nor, so far as I know, to any other
person, a wish that * his/her remains should not be submitted to anatomical
examination.

I certify that the death in this case was not caused by an infectious disease, and that a
medical certificate of the cause of death has been given.

(Official Designation).....(Signed).....

* Delete word not applicable.

Form D

Anatomy Act 1930

Notice to the Principal of the.....School of Anatomy.

Date.....19.....

Sir,

I herewith send you, per (a).....the body of.....

a (b).....who died on (c).....at

(d).....aged (e).....(f).....

A certificate signed by a duly qualified medical practitioner and stating the cause of death must be furnished with this form.

(Signed).....

Lawful Custodian of Body.

(a) Here state name of conveyor of body. (b) Here state sex. (c) Date of death.

(d) Place of death. (e) Age. (f) Religion of Deceased.

Form E

Anatomy Act 1930

Register No.

.....School of Anatomy.

Date.....19.....

Received this day, from.....the body of.....

lately an inmate of.....

.....

Principal

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Schedule A

Form F

Anatomy Act 1930

Register No.

Notice from the Principal of the.....School of
Anatomy to the Executive Director, Public Health and Scientific Support Services of
Receipt of Body for Anatomical Examination.

Date..... 19.....

Name of Deceased.....

Sex.....Age (as far as known).....Late abode.....

Date of Death.....Place of Death.....

Religious Persuasion.....

Day and hour of receiving body at School of Anatomy —

By whom brought.....

To whom delivered.....

I certify that I received with the body the certificate of the cause of death
of..... which I herewith enclose.

(Signed).....

Form G
Anatomy Act 1930

Register No.

Notice from the Principal of the.....School of
Anatomy to the Executive Director, Public Health and Scientific Support Services of
having returned, for the purpose of sepulture, the remains of persons which have
undergone Anatomical Examination.

Name of Person whose dissected remains are to be buried.	When Received.	To whom given for Burial; that is to say, for Conveyance to the Cemetery.	Religious Persuasion of Deceased.

(Signed).....

(Date).....19.....

Form H

Anatomy Act 1930

Register No.

Authority for burial of remains of Person who has undergone
Anatomical Dissection.

Date.....19.....

To.....

.....

Sir,

You are requested to arrange the interment of the remains of
in the portion of the Cemetery.

Details of deceased are as follows: —

Date of death.....

Age.....

Sex.....

Religious Persuasion.....

.....

Principal.

.....

School of Anatomy.

Form I

Anatomy Act 1930

Register No.

Acknowledgment of having received Dissected Remains of Body for
Interment.

I, this day received for interment, from the.....School of
Anatomy the remains of.....whose body
was delivered at the School of Anatomy on the.....and
was entered in "Receiving Book" under the

No.

(Signed).....

(Date).....19.....

To be filed and kept by the Principal of the School of Anatomy.

Anatomy (Forms and Fees) Regulations 1933
Schedule A

Form J

Anatomy Act 1930

Register No.

Notice to the Executive Director, Public Health and Scientific Support Services by
Person receiving Dissected Body from.....School
of Anatomy for the purpose of Burial.

Date..... 19.....

Sir,

I, this day, received the remains of.....and conveyed same to
(*).....for sepulture in the (†).....portion
of the Cemetery.

Accompanying is the certificate of the officiating clergyman.

(Signed).....

(Address).....

(*) Here name Cemetery (†) Here state Denomination

*[Schedule A inserted in Gazette 2 July 1948 pp.1467-9; amended in
Gazettes 17 December 1948 p.2975, 12 June 1958 pp.1291-2;
29 June 1984 p.1781; 22 January 1999 p.213.]*



Notes

- ¹ This reprint is a compilation as at 10 December 1999 of the *Anatomy (Forms and Fees) Regulations 1933* and includes the amendments referred to in the following Table.

Table of Regulations

Citation	Gazettal	Commencement	Miscellaneous
	3 February 1933 pp.193-4	3 February 1933	Citation subsequently amended (see footnote to regulation 1)
	2 July 1948 pp.1467-9	2 July 1948	
	17 December 1948 p.2975	17 December 1948	
	13 June 1958 pp.1291-2	13 June 1958	
<i>Health Legislation Amendment Regulations 1984 regulation 4</i>	29 June 1984 p.1780	1 July 1984 (see regulation 2)	
<i>Anatomy (Forms and Fees) Amendment Regulations 1989</i>	20 October 1989 pp.3838-9	20 October 1989	
<i>Anatomy (Forms and Fees) Amendment Regulations 1992</i>	12 June 1992 pp.2416-7	1 July 1992 (see Regulation 2)	
<i>Anatomy (Forms and Fees) Amendment Regulations 1998</i>	22 January 1999 p.213	22 January 1999	