Birth Announcement for Newspaper Publication

Infant’s name__________________________________________ Sex________
Date of Birth: month _____, day____, year______ Infant’s weight: lbs._____, ozs._____
Hospital: ________________________________________________
Mother’s Name__________________________________________
Mother’s address__________________________________________
Father’s Name ____________________________________________
Father’s Address ________________________________________

Is this your first child ______ yes ______ no
Names of Infant’s Sisters ________________________________
__________________________________________________________________________________
Names of Infant’s Brothers ________________________________
__________________________________________________________________________________
Maternal Grandparents ____________________________________
City of residence__________________________________________

Paternal Grandparents ____________________________________
City of residence ________________________________________

I hereby authorize release of this information to the newspaper for publication in announcing the
birth of my child.
Parent’s signature ___________________________________________ Date____________________

Please include a phone number if more information is needed ______________________

Call Margaret at Southern Standard if you have questions, 931-473-2191
Or info can be E-mailed to lifestyles@southernstandard.com