

PHAROS-TRIBUNE

517 E. Broadway P.O. Box 210 Logansport, Indiana 46947-0210 (219) 722-5000 FAX (219) 732-5070

BIRTH NOTICE

If you would like to announce your baby's birth in the *Pharos-Tribune*, please fill out this form COMPLETELY and LEGIBLY and submit (mail, fax, or deliver) to the newspaper within **30 days** of the birth. PARENT(S) or GRANDPARENT(S) must live within the six-county *Pharos-Tribune* circulation area for the notice to be published.

Additional papers available in limited quantities:

Yes, I would like to purchase additional papers: 5 – additional papers \$3.75 10 – additional papers \$7.50

No thank you, I do not wish to purchase additional papers.

Invoice # _____

PARENTS' FULL NAMES: _____
(As you wish them to appear)*

CITY/STATE: _____

TELEPHONE (in case of questions): _____
BIRTH: Single Multiple **BABY'S SEX:** Male Female

BABY'S FULL NAME: _____

DATE/PLACE OF BIRTH: _____

MATERNAL GRANDPARENTS (Mother's Parents):
NAMES/CITY/STATE _____

MATERNAL GREAT-GRANDPARENTS (Mother's Grandparents; only if living):
NAMES/CITY/STATE _____

PATERNAL GRANDPARENTS (Father's Parents):
NAMES/CITY/STATE _____

PATERNAL GREAT-GRANDPARENTS (Father's Grandparents; only if living):
NAMES/CITY/STATE _____

Permission is given to the *Pharos-Tribune* to publish the above information. Parent(s) please sign below:

Mother's Signature*

Witness

Father's Signature*

*It is the policy of the *Pharos-Tribune* when announcing the birth of a child to a single woman, or when the father's name is different than the baby's last name, to require the father's signature above if he wishes his name released to the media.

The *Pharos-Tribune* is not responsible for errors, omissions or interpreting legibility of submitted information. Birth Notices are published on a space available basis and do not include vital statistics, siblings, extended relatives or other personal information. Any exceptions to the stated policies will require editorial approval.

FROM: _____

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BIRTH NOTICE
P.O. BOX 210
LOGANSPOORT, IN 46947
