Birth announcement

TIMES NEWS, P.O. BOX 239, LEHIGH TON, PA 18235 • 1-800-443-0377

Birth announcements and pictures will be published in black and white, free of charge, or in color for a fee of $15. We will accept birth announcements up to three months after the birth. Announcements will not be published after that date.

Please complete the following information. Both parents MUST sign this form and include their telephone numbers for verification if both of their names are to be published in the announcement.

Scanned pictures or those that have been printed on either a home computer or picture-in-minute station cannot be used. Those wishing to submit a digital photo via email should take the picture with the camera set at the highest resolution. To check the resolution size on your camera, click "Menu" then "Image Size." It should be set to the "L" setting or largest width-to-height ratio setting, i.e. 2000 x 3000. Send digital photos to tnlifestyles@tonline.com. The photo should not be resized for transmission. Our technical staff will determine the suitability of submitted photographs. Those that do not meet the aforementioned guidelines will be rejected.

Mail form to the above address, attention Lifestyle Editor. Make checks payable to the TIMES NEWS.

If you have a question about submitting a birth announcement or photo, please call our Lifestyle Department at 1-800-443-0377, ext. 3140.

Baby’s full name:____________________________________________________________________

Picture enclosed, to be emailed, or no picture? ____________________________________________

Mother’s name and address: __________________________________________________________

Mother’s telephone number: ___________________________________________________________

Father’s name and address: ___________________________________________________________

Father’s telephone number: ___________________________________________________________

Date and time of birth: _______________________ Weight: _____________ Length:_____________

Location of birth: __________________________________________________________________

Siblings’ names and ages, if any: ______________________________________________________

Maternal grandparents’ names and location: _____________________________________________

Paternal grandparents’ names and location: _____________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

Mother’s signature ____________________________________________________________

Father’s signature ____________________________________________________________