Allied News
Birth Announcement

Information about the parents:
(please give full names and mother's maiden name)

Mother: _____

Address: _____

Father _____

Address _____

Information about your newborn:

son   daughter (circle one)

Name: _____

Name of hospital_____

Date of birth:_____ Weight:_____

Names and ages of brothers and/or sisters _____

_____

_____

Information about grandparents:

Maternal grandparents: _____

Address: _____

Paternal grandparents _____

Address: _____

Signature_____

Date_____ Phone _____