

Southern Maryland Newspapers birth announcement

Baby's full name _____

Date of birth _____ Time _____ a.m. ___ p.m. ___

Female _____ Male _____

Weight _____ pounds _____ ounces

Length _____

Place of birth _____

Town _____

Mother's name _____

Address (city and state) _____

Father's name (city and state) _____

Brothers _____

Sisters _____

Maternal grandparents _____

Address (city and state) _____

Paternal grandparents _____

Address (city and state) _____

I agree that the information supplied on this form is correct to the best of my knowledge. I have given this information with the purpose of having it published in (please check) ...

Mother's signature _____ Father's signature _____

Maryland Independent

The Enterprise

Calvert Recorder

Please include the name of the person filling out this form and the number where they can be reached in case there are any questions. The telephone number will not be published. It is for verification purposes only:

Mail form to:

Maryland Independent
7 Industrial Park Drive
Waldorf, MD 20602
Fax 301-645-2175

The Enterprise
P.O. Box 700
Lexington Park, MD 20653
301-737-1665

Calvert Recorder
P.O. Box 485
Prince Frederick, MD 20678
410-535-5883