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## *Birth Announcement*

PLEASE PRINT CLEARLY

Baby's Name: \_\_\_\_\_ Male  Female

Born on: ( Date ) \_\_\_\_\_ Time of Birth: \_\_\_\_\_ A.M. P.M.

Weight: \_\_\_\_\_ lbs. \_\_\_\_\_ ozs. Length: \_\_\_\_\_

Hospital: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Father's Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Brothers's Name: \_\_\_\_\_

Sisters's Name: \_\_\_\_\_

Grandparents:  
( Mother's Parents ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Grandparents:  
( Father's Parents ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Great Grandparents: ( Please include City & State ) \_\_\_\_\_

Other Comments: \_\_\_\_\_

Informant's Name: \_\_\_\_\_ Relation to New Born: \_\_\_\_\_

Phone Number: \_\_\_\_\_ INDEX - TEXAN