

# ORDER FORM - ENGAGEMENT ANNOUNCEMENT



To make your announcement as accurate as possible, please type or print all information. Fill in only those items you would like to include in your published announcement. Please use formal names, complete with middle initials. In case of serviceperson, give the rank and branch of service. If any person mentioned is deceased, please indicate by writing "the late" in front of the name. Street addresses are not necessary. Send this along with your signed authorization form.

Ceremony Date/Time \_\_\_\_\_ Location \_\_\_\_\_ (Church, temple or place)  
City \_\_\_\_\_ State \_\_\_\_\_ Officiating Clergy \_\_\_\_\_  
Type/Description of Ceremony \_\_\_\_\_  
Reception Description/Location \_\_\_\_\_

## SPOUSE A'S INFORMATION

Full Name \_\_\_\_\_  
Present Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Parents \_\_\_\_\_  
(Please indicate if divorced or deceased )  
Parent A's Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Parent B's Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Grandparents \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Grandparents \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Schools attended \_\_\_\_\_  
(Please indicate if attended or graduated)  
Occupation \_\_\_\_\_

## SPOUSE B'S INFORMATION

Full Name \_\_\_\_\_  
Present Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Parents \_\_\_\_\_  
(Please indicate if divorced or deceased )  
Parent A's Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Parent B's Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Grandparents \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Grandparents \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Schools attended \_\_\_\_\_  
(Please indicate if attended or graduated)  
Occupation \_\_\_\_\_

Special information about the couple, the engagement or wedding plans


We may rent, sell or share your name(s), street address(es) and email address with our affiliates and carefully selected other companies to provide you with offers and information that may be of interest to you.

CHECK ONE

**Photo attached** (Note: photos will not be returned)

**Digital photo.** Send .jpg format not exceeding 1MB to [celebrations@syracuse.com](mailto:celebrations@syracuse.com). Use last name as subject.

**No photo.**

# ORDER FORM - AUTHORIZATION



This form authorizes the publication of your special occasion announcement in The Post-Standard and on [syracuse.com](http://syracuse.com). It must be completely filled out and submitted along with your copy and photo no later than noon Wednesday, two Fridays prior to Sunday publication. Please type or print the information carefully.

I, \_\_\_\_\_ (the person placing the announcement), certify that the information and material (including photographs) submitted for publication is true, not defamatory, does not invade the privacy of any person and does not infringe any copyright. I agree to indemnify and hold harmless The Post-Standard, its employees and agents, from and against all claims and expenses (including attorney fees and expenses) arising out of the publication of material supplied by me for publication. I agree that The Post-Standard may use, crop, modify or republish my announcement in any form (in any media now in existence or hereafter developed) in whole or in any part. I agree that all photographs submitted become The Post-Standard's property and will not be returned. I also represent that I have permission from whoever took the photographs to authorize the use(s) provided herein, and I agree to assume all responsibility and liability for any claim arising out of publication of the photographs (or other information) that I submit to you.

Preferred publication date: \_\_\_\_\_ (Must be submitted to The Post-Standard two Fridays prior to the Sunday publication date.)

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## ■ SUBMITTED BY

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email (for proofs) \_\_\_\_\_

Address \_\_\_\_\_

Apt. # \_\_\_\_\_

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Please note: after filling out all of the information, save, print and sign. Then return by fax, mail or drop it in the payment box in the Advance Media New York lobby Mon.-Fri. 9:00 a.m.-4:30 p.m. or email the form to us.

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# Of Keepsake Copies \_\_\_\_\_ \$ \_\_\_\_\_

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## ■ SEND US YOUR ORDER FORM

**Mail:** Attn: Celebrations

Advance Media New York

220 South Warren St.

Syracuse, NY 13202

**Fax:** 315-470-2050

**Questions:** 315-470-2093

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[celebrations@syracuse.com](mailto:celebrations@syracuse.com)