



BE SURE TO INCLUDE PAYMENT AND PHOTO WITH YOUR FORMS

(Photo sizes available on separate form)

Publication date desired _____

\$3.00 per column inch To request copies: \$2.00 per copy Number of copies _____ Price _____

Amount Enclosed \$ _____

Name _____ Address _____

City _____ State _____ Zip Code _____ Phone Number: _____

Cash: ___ Check: ___ CC: _____ Exp. Date: _____

(Deadline for submitting form is noon on Friday, nine days before the desired Sunday publication. Forms submitted after the deadline will be published the following Sunday.)

Birthday Celebration Form

PLEASE FILL OUT FORM BELOW (LEGIBLY) OR FEEL FREE TO WRITE YOUR OWN.

Signature below states that customer agrees to all guidelines, terms and conditions.

Information submitted by _____

Relationship to individual _____ Daytime Phone _____

Name of individual(s) _____

City, state of residence _____ Daytime Phone _____

Date of birth (year and age are optional) _____ Age _____

Date and time of celebration _____

Birthday party theme _____

Location of celebration (name of church, recreation center, home) _____

City, state _____

Host(s) of celebration _____

Special guest(s) in attendance (space permitting) _____

THE NEWS VIRGINIAN

CELEBRATIONS COORDINATOR

685 W. Rio Road; (P.O. Box 9030), Charlottesville, VA 22901 (22906)

Phone: 434-978-7288, Fax: 434-978-7204

Monday-Friday 9 a.m. until 5 p.m., dhubbard@dailyprogress.com