

573-682-2133  
(PHONE)  
573-682-3361  
(FAX)



# Engagement Announcement Form

PLEASE TYPE  
OR PRINT  
LEGIBLY

By submitting this form you are authorizing the *Centralia Fireside Guard* to print this information in our style.

\_\_\_\_\_ and \_\_\_\_\_  
(Bride's father's name) (Bride's mother's name)

of \_\_\_\_\_ announce the engagement of their daughter,  
(City, State)

\_\_\_\_\_, to \_\_\_\_\_  
(Bride's name) (Groom's name)

son of \_\_\_\_\_ and \_\_\_\_\_  
(Groom's father's name) (Groom's mother's name)

of \_\_\_\_\_ .  
(City, State)

The bride-to-be is a \_\_\_\_\_ graduate of \_\_\_\_\_  
(Year) (Name of high school or college)

in \_\_\_\_\_ . She is employed as a \_\_\_\_\_  
(City, State) (Job title)

with \_\_\_\_\_ .  
(Name of employer)

The future groom is a \_\_\_\_\_ graduate of \_\_\_\_\_  
(Year) (Name of high school or college)

in \_\_\_\_\_ . He is employed as a \_\_\_\_\_  
(City, State) (Job title)

with \_\_\_\_\_ .  
(Name of employer)

A \_\_\_\_\_ is planned at \_\_\_\_\_  
(Date of wedding - including year) (Location of wedding - church or hall)

in \_\_\_\_\_ .  
(City, State)

---

Information below will not be published.

Fax 573-682-3361 or  
Mail or return to:  
*Centralia Fireside Guard*  
123 N. Allen St., P.O. Box 7  
Centralia, MO 65240

Date \_\_\_\_\_ Submitted by: \_\_\_\_\_

Telephone # \_\_\_\_\_

Bride's Telephone # \_\_\_\_\_