Chagrin Valley Times / The Solon Times

P.O. Box 150, Chagrin Falls, OH 44022 • Phone: 440-247-5335 • Fax: 440-247-5615

ENGAGEMENT ANNOUNCEMENT FORM

Engagement submitted by: Name _____ Phone _____

Address _____

Engagement announced by: _____

Name of bride-elect: _____

Parents of bride-elect: _____

Town of residence (city, village or township): _____

Name of future groom: _____

Parents of future groom: _____

Town of residence (city, village or township): _____

Schools attended/degrees received by bride-elect: _____

_____

Location and type of employment: _____

Schools attended/degrees received by future groom: _____

_____

Location and type of employment: _____

Date and location of ceremony: _____

Place additional information and/or instructions on the back side of this form. Thank you.

S FORMS 1/02