



# Anniversary Form

Name of anniversary couple \_\_\_\_\_

Address (will not be published) \_\_\_\_\_

Tell us about your parents (optional)

Husband's parents \_\_\_\_\_

Wife's parents \_\_\_\_\_

Date of ceremony \_\_\_\_\_

Location of ceremony \_\_\_\_\_

Attendants (optional) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of clergy (optional) \_\_\_\_\_

School of occupation of husband (indicate if retired from employment)

\_\_\_\_\_

\_\_\_\_\_

School of occupation of wife (indicate if retired from employment)

\_\_\_\_\_

\_\_\_\_\_

Children (indicate Mr. & Mrs., Miss, Ms.) and their current residence

\_\_\_\_\_

\_\_\_\_\_

How was anniversary celebrated? \_\_\_\_\_

\_\_\_\_\_

Guests attended from \_\_\_\_\_

\_\_\_\_\_

Number of grandchildren \_\_\_\_\_

\_\_\_\_\_

Additional information may be attached