

Providence Journal Celebrations

Sunday Journal Announcement Ads.

GRADUATIONS

What to include:

- ◆ Name
- ◆ Date
- ◆ Parents, Grandparents, Siblings, Children
- ◆ School Graduated from
- ◆ Degree Earned
- ◆ Plans for Future
- ◆ School Awards Won
- ◆ School Activities Participated in
- ◆ Residence (City & State)
- ◆ Personal Message



Sample ads

John M. Doe

Congratulations to John M. Doe, of Smithfield on his graduation from St. Michael's Academy in Providence.

John was the captain of the football and baseball teams at St. Michael's and also was the recipient of the 2003 Most Athletic Student award.

John will be attending the University of Rhode Island in September as a Chemistry major.

Congratulation, John. We love you and we are very proud of you!

Mom, Dad, Linda, Becky and family!

Elizabeth Lauriano

Congratulations Elizabeth
Johnston High School
Graduation
June 3, 2003

Through the years we have watched you grow into a fine young lady.

We are so proud of you.

All our love!

Mom, Dad, Chris and Katy.

Compose Your Announcement Here:

Signature of Parent or Individual Placing Announcement: _____



Providence Journal Celebrations

Sunday Journal Announcements.

Deadlines

Forms must be mailed to The Providence Journal, Classified Department, 75 Fountain St., Providence, RI 02902, 10 days in advance of the Sunday publication day you are requesting.

Rates

- ◆ \$3.68 per line (approximately 8 lines per inch including 1 line bold heading) — **minimum announcement 8 lines or 1 inch.**
- ◆ Celebrations use an average of 32 characters per line including spaces and punctuation. All copy submitted is subject to approval by The Providence Journal.
- ◆ Black and white pictures are \$74.54 (in addition to space for announcement). Photos of the individual or couple may run with each announcement. The newspaper reserves the right to crop or reject photos at its sole discretion. (Pictures will run 2-inches deep.) Digital pictures are accepted.
- ◆ Final copy and price quote must be confirmed by the newspaper via phone with individual placing announcement before publication.

Please indicate which Sunday you want your announcement published:

Sunday, (date) _____

Information

Name: _____
 Address: _____ Apt./Fl. _____
 City/Town: _____ State: _____ Zip Code: _____
 Home Phone: _____ Alternate Phone: _____
 Alternate Contact Name: _____

Payment Options

All Celebrations ads are prepaid announcements. You can prepay with your credit card by filling out the required information. You can also prepay with a check, payable to The Providence Journal. Please call 401.277.7730 for more information.

Total Cost Per Line: (\$3.68 per line) \$ _____
 Photo: (\$74.54) \$ _____
 Add (\$21.20) Online: \$ _____
 Total Due: \$ _____

Credit Card Check

CREDIT CARD INFORMATION

Name on Credit Card: _____
 Visa Mastercard Discover American Express
 Credit Card Number: _____
 Expiration Month: _____ Year: _____

Individuals placing an announcement must match the name on the credit card or check paying for the announcement. If you are submitting an announcement for someone other than yourself, the newspaper reserves the right to contact the individual(s) for verification of the announcement. Naming of third parties in the announcement assumes you have consent from the third party.

Purchase additional copies of your announcement for a low rate of 63¢ (Sunday)

Sunday newspapers delivered the next business day after the ad runs
◆ Minimum Quantities: 10 Sunday newspapers — must order 10 ◆

Order and complete payment must be received at least 5 days prior to publication date.

All papers purchased will be delivered to one location (as identified below) and cannot be delivered outside of The Providence Journal circulation delivery area.

Sunday, (date) _____
 # _____ of Sunday papers at 63¢ each

Total Cost: _____

Please deliver newspapers to:

Name _____
 Street # _____ Street Name: _____ Apt./Fl. _____
 City/Town: _____ State _____ Zip _____

◆ Check payable to The Providence Journal Company ◆

CREDIT CARD INFORMATION

Name on Credit Card: _____
 Visa Mastercard Discover American Express
 Credit Card Number: _____
 Expiration Month: _____ Year: _____