

**B'NAI ABRAHAM AND YEHUDA LAIB FAMILY SOCIETY**

**MEMBERSHIP FORM**

NAME (English): \_\_\_\_\_  
(Include maiden name if applicable)  
(Hebrew): \_\_\_\_\_

SPOUSE'S NAME (IF APPLICABLE) \_\_\_\_\_  
(include maiden name if applicable)  
(Hebrew) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE : \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DATE OF BIRTH (You) \_\_\_\_\_  
(Spouse) \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

MARRIAGE DATE \_\_\_\_\_

**CHILDREN:**

NAME (English)                      Hebrew                      Date of Birth

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Mail this form and dues of \$18 made out to "BAYL Family Society" to  
**BARRY YATOVITZ**  
Financial Secretary  
7 Indian Pony Court  
Owings Mills, MD 21117  
(USA)

OR

Use PayPal with the account name of **golobfamily@comcast.net**