

Latvia SIG Membership Questionnaire

NAME:..... PHONE:.....
ADDRESS:..... FAX:.....
CITY:.....STATE/PROVINCE:.....
ZIP/POSTAL CODE:.....
COUNTRY (if other than U.S.):.....
E-mail address:.....

Whom are you researching? (Latvian cities only) Please use location names/spellings as found in *Where Once We Walked*.

NAME:..... LOCATION:.....
NAME:..... LOCATION:.....
NAME:..... LOCATION:.....
NAME:..... LOCATION:.....
NAME:..... LOCATION:.....

Bibliographical or archival sources used in your Latvian genealogical research:

Information on Latvian Jewish communities, history of Jewish presence, current status, contacts:

Cemeteries, travel experiences, etc:

Suggested newsletter topics:

Translation skills: Hebrew, Latvian, Russian, Yiddish, Other (specify)

I would be willing to volunteer for the following activities:

Please return your completed questionnaire, along with a check for \$25 (U.S. and Canada), \$35 for overseas members payable to Latvia SIG, to:

Latvia SIG
5450 Whitley Park Terrace, #901
Bethesda, MD 20814-2061

Enter contact information in FF: Yes ___ No___

Please circle newsletter preference: PDF Hard Copy

Note: If you prefer to join or renew your membership for multiple years, please submit \$25 (\$35 overseas) for the first year, and \$20 (\$30 overseas) for each subsequent year.