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**The Georgiana Thomas Grand Chapter**  
*Order of the Eastern Star, PHA*  
*Jurisdiction of the District of Columbia*

♥ Love One Another ♥

# PSBYF Application

(Ages 4 to 18)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home \_\_\_\_\_ Cell \_\_\_\_\_

Youth Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Sponsor/Guardian (Print Name) \_\_\_\_\_

Parent/Sponsor/Guardian Cell \_\_\_\_\_

Parent/Sponsor/Guardian Email Address \_\_\_\_\_

Parent/Sponsor/Guardian Signature \_\_\_\_\_

**Initiation Fee:** \$5.00      **Dues:** \$6.00 per year

Meetings: Third Saturdays ~ 12:00pm until 2:00pm  
 Masonic Temple: 4<sup>th</sup> Floor ~ Room 413  
 1000 U Street NW ~ Washington, DC 20001

**Return form to: PSBYF Grand Youth Directress Catrice R. Vandross**  
 1000 U Street, NW, Room 413 ~ Washington, DC 20001

*For more information, please contact:*  
 GYD Catrice R. Vandross  
 (703) 728-5771 or [psbyf1956@gmail.com](mailto:psbyf1956@gmail.com)