Application For Associate Grange Membership

(Annual Dues - $40.00 prorated first year)

PLEASE PRINT

Name: _____

Address: _____

City/Zip: _____

Phone: ( ) _____ Birthdate: ___/___/___

Occupation/Business: _____ ☐ Retired

FOR SUBORDINATE SECRETARY

Grange: _____

No. _____

Grange News .. ☐ Yes ☐ No

Date Joined: _____

Fees Paid: $ _____

Dues Paid $ _____

For State Secretary Use

Member No. _____

I respectfully petition to be enrolled as an Associate Member of the Grange. In presenting this application, I desire to advance the interest and principles of the Grange, receiving in turn such benefits and advantages as may accrue to all who are Associate Members of the Grange. I promise compliance with the Constitution and By-Laws of the Grange. I certify that I have not previously applied for membership in the Grange within the past six months.

☐ The benefits of Fraternal membership have been explained to me and I do not wish to become a fraternal member at this time.

_____ ___/___/___ _____

Signature of Applicant Date Referred by

Month Joined	January - February - March	April - May - June	July - August - September	October - November - December	Amount Enclosed MAKE CHECK PAYABLE TO "GRANGE"
Amount Due Includes $20 App. Fee	$50.00	Jun $40.00	$30.00	$60.00	$_____

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