



# Application For Membership Subordinate Grange

To the officers and members: I, \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Phone (\_\_\_\_) \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

E-Mail Address \_\_\_\_\_

Occupation: \_\_\_\_\_  
(if retired, please list previous occupation)

respectfully petition to be initiated and enrolled as a member of your Grange.

In presenting this application, I am influenced by no motive other than a desire to unite with others in elevating and advancing the interest of Husbandry and Rural Life and receiving in return such benefits and advantages as may accrue to all who belong to the Grange. I promise a faithful compliance with the By-Laws of this Grange, and the Constitution and Laws of the State and National Grange. I have not previously applied for membership in this or any other Grange within the past 6 months.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Recommended by: 1. \_\_\_\_\_ and 2. \_\_\_\_\_

Application Fee: \$ \_\_\_\_\_ Annual Membership Dues: \$ \_\_\_\_\_

[complete two copies - one copy to be retained by Subordinate Grange, the second to be forwarded to the State Grange]

For additional information, contact the California State Grange 2101 Stockton Blvd. Sacramento, CA. 95817 (916) 454-5805

Fax (916) 739-8189 or email info@grangeonline.com visit our website at www.grangeonline.com

Form: SMA-PDF-2002

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Cut along dotted line  
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### FOR SUBORDINATE SECRETARY

Grange: \_\_\_\_\_

Grange #: \_\_\_\_\_

Fees Paid \$ \_\_\_\_\_ On: \_\_\_\_\_

Dues Paid \$ \_\_\_\_\_ On: \_\_\_\_\_

App. Recvd On \_\_\_\_\_

Approved On \_\_\_\_\_

Obligated On \_\_\_\_\_

Affiliate member?  Yes  No

If yes, List Home Grange Name & Number

For State Grange Office Use Only

Mbr. Number \_\_\_\_\_

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Grange #: \_\_\_\_\_

Fees Paid \$ \_\_\_\_\_ On: \_\_\_\_\_

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