

## Application for Individual Subordinate Grange Membership

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(Please Print Your	Full Name)	pections	penno	n to be	mua	ted and enrolle
member in your Grange. In an a desire to unite with other or on the principles of the second accrue to all who beleaws of this Grange, the Byne National Grange. I have brange within the past six metals are second.	n presenting this a hers in elevating a Grange and recei long to the Grange Laws of the State not applied for ar	and advativing in real proress. I proress Grange	ancing ancing ancing seturn some seturn setu	the inte uch bei faithful ne Cons	rest one fits compartitution	of my commun and advantagoliance with the on and By-Law
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Recommended by 1:			2:		, 1	
Th	is Section must be o	complete	d by Api	olicant		
Street Address:	City	<del>a 1</del> 100		State	(	Zip Code
Date of Birth: Phone Nu		ail Address				
Occupation (if retired, please list occu	pation you retired from)				R	etired?
This S	Section for use by Se	ubordina	te Secre	tary Onl	У	
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Reported to State Grange:		T		<del>1771</del> (1771) - 41 - 17		10 to
[]Q1 []Q2 []Q3 [	] Q4 of 20					
Th	nis Section for use b	y State S	ecretary	Only		
Application Received On:		n This Date:			mber N	umber Assigned:
			I			

Member Application Type Ind-2014



## **Application for Family Subordinate Grange Membership**

Ve the	U lite	onicers and men	11DE S OI					Grang	E NO		
s a member in your Grange. In presenting this application, We are influenced by no motive other han a desire to unite with others in elevating and advancing the interest of my community through the principles of the Grange and receiving in return such benefits and advantages as may accrue to til who belong to the Grange. We promise a faithful compliance with the By-Laws of this Grange, the By-Laws of the State Grange and the Constitution and By-Laws of the National Grange. We ave not applied for and been rejected for membership in any other Grange within the past six nonths.    Maintenance   Maint	Ve the	2					netition	to he ii	nitiated and e	enrollec	
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This Section must be completed by the Family applying for membership  # Full Name (Print) Date of Birth Occupation Signature  1	ne By- ave n	Laws of the Stat ot applied for an	te Grange a	ind the Cons	stitution and	By-Law	s of the	Nation	al Grange. V	<i>N</i> e	
This Section must be completed by the Family applying for membership  # Full Name (Print) Date of Birth Occupation Signature  1	pplicat	tion fee \$	(mu	st accompany a	oplication)		Annual	Dues \$			
# Full Name (Print) Date of Birth Occupation Signature  1											
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2 3 4 5 6 Street Address: City State Zip Code Phone Number #1 Phone Number #2 Email Address Occupation (if retired, please list occupation you retired from) Retired? [] Yes [] No  This Section for use by Subordinate Secretary Only Application Received On: Application Voted On: Applicant Obligated On: Application Fee Received On: Amount of App Fee Rov'd: Dues Received On: Amount of Dues Rov'd: \$ Type of Membership: Gained By: If gain be Demit or if Affiliate, list home Grange [] Fraternal [] Affiliate [] Application [] Demit Reported to State Grange: [] Q1 [] Q2 [] Q3 [] Q4 of 20  This Section for use by State Secretary Only	#	Full Name	(Print)	Date of Birth	Occupa	tion		Sig	nature	-	
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Application Received On: Enrolled On This Date: Member Number Assigned:			This S	Section for u	se by State	Secretary	y Only				

Member Application Type Fam-2014



## Application for Junior Grange 1+ Membership



To the officers and mem	bers of		- 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8		Grar	nge No				
(Please Print Your	Full Name)	respectfully petition to be initiated and enrolled as								
a Junior 1+ member in yo Pledge and will endeavo	our Grange. I pro	mise a f	aithful com	pliance v						
Signature:			Date Signed:							
As parent (or guardian), of the above name applicant, I give my permission for them to join this Grange, as a Junior 1+ member .										
Signature: Date Signed:										
Application fee \$		Annual Dues \$								
This S	Section must be con	pleted b	y Parent for	the Applic	cant	2				
Street Address	City				ate	Zip Code				
Date of Birth Sex	Phone Number	Ema	l Address	<b>1</b>						
Print full name of Parent or Legal Gu	ardian									
	This Section for t	use by Ju	nior Leader	Only						
Application Received On:		Application Voted On:			Junior Pledge Given On:					
Application Fee Received On: A	mount of App Fee Rcv'd:	Dues Rec	eived On:		Amount of	f Dues Rcv'd:				
Type of Membership:	Reported to State Grange:									
[ ] 1 + Member	Application		[]Q1 []Q2 []Q3 []Q4 of 20							
This Section for use by State Secretary Only										
Application Received On:	Enrolled On This Da	Enrolled On This Date:			Member Number Assigned:  5Member_Application_Type_Junior_1+_2015					