OREGON STATE GRANGE
LIFE MEMBERSHIP APPLICATION

Please submit completed application, Life Membership fee and one year additional dues to your Subordinate/ Community Secretary. The minimum Life Membership fee for a current member is $450. However, your Grange may have set the fee above this minimum amount.

Brother ☐ Sister ☐ _____ _____ _____
First Name Middle Initial Last Name

_____ _____
Mailing Address Street Address *(if different)*

_____ _____ _____
City State Zip

(_____) _____ _____ _____
Phone Number E-Mail Address Date of Birth

_____ #_____ _____
Subordinate Grange Number County

Date of Obligation: _____ Date Welcoming Ceremony: _____

Date of 4th Degree: _____ Date of 5th Degree: _____

Date of 6th Degree: _____ Date of 7th Degree: _____

Ever serve as a Delegate to the State Grange Convention? Yes ☐ No ☐
If yes, Subordinate/Community or Pomona Grange(s) and year(s): _____

_____

Fee accompanying this application $_____

(Information below to be filled out by Subordinate/Community Secretary)

This portion of the application is to be completed by the Subordinate/Community Secretary and sent, along with the Life Membership fee, to the Oregon State Grange. The check for the fee should be made out to the Oregon State Grange. The fee is invested in the OSG Life Membership Trust Fund. An annual report on your investment amount will be provided to you when the year-end reports are finalized. The fee must be invested with the OSG for a complete calendar year before it starts paying out.

Please send certificate and card to:

☐ 1. Subordinate/Community Secretary
☐ 2. Applicant

Name: _____

Address: _____

City, St, Zip: _____

I hereby certify that the applicant is entitled to purchase a Life Membership in this Subordinate/Community Grange and has paid this year's current dues and next year's dues. I also certify that all the information listed on this form is accurate to the best of my knowledge.

_____
Secretary, Subordinate/Community Grange

_____ #_____
Grange

For OSG office use only

Certificate # _____

Receipt # _____

send to: Oregon State Grange
643 Union St SE
Salem OR 97301
503-316-0106 ~ office@orgrange.org