

Application for Individual Subordinate Grange Membership

o the officers and	members	of						Grange No	
				Please Print G					
	(Please Print Your	Full Manage	resp	ectfully	petition	to be i	nitiate	d and enrolle	:d a
member in your	•	-	a thic a	nnlicati	on lam	influor	aced b	v no motive (ath.
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oplication fee \$ (must accompany application)						Annual Dues \$			
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Recomme									
	Thi	s Section m	ust be c	omplete	d by App	licant			
Street Address:		City			State		Zîp Code		
Date of Birth:	Phone Nu	mber	l IEmai	il Address		1		1	\dashv
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Occupation (if retired,	ed from)				Retir	Retired?			
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Application Re		ection for u	Application					bligated On:	\dashv
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	Type of Membership: Gaine				If gain be Demit or if Affiliate, list home Gr			, list nome Grange	
[] Fraternal [] Affiliate	[] Applica	ation []	Demit					
Reported to State Gra	nge:								ヿ
[]Q1 []Q	2 [] Q3 [Q4 of 20							ĺ
	Th	is Section f	or use b	v State S	Secretary	Only			\exists
Application Received On:			Section for use by State Secretar Enrolled On This Date:			Member Number Assigned:			
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							Memb	er Application Type Ind-2	014