

**SUBORDINATE GRANGE  
APPLICATION FOR MEMBERSHIP**

Name: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I hereby apply for membership in \_\_\_\_\_ Subordinate Grange # \_\_\_\_\_. I desire to unite with others in elevating and advancing the interest of the American Family and community life, receiving in turn the benefits and advantages of those who belong to the Grange. I promise a faithful compliance with the By-laws of this Grange and the Constitution and By-laws of the State and National Granges. I have not previously applied for membership in this or any other Grange during the past six months.

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

Recommended by: \_\_\_\_\_

Application Fee \$ \_\_\_\_\_

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