

ADDITIONAL FAMILY MEMBERS APPLYING (IF APPLICABLE)

Name _____ Date of Birth _____

Email _____ Occupation _____

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Name _____ Date of Birth _____

Email _____ Occupation _____

RECOMMENDED BY

I, _____, a member in good standing of
_____ Grange # _____ (State _____) and

I, _____, a member in good standing of
_____ Grange # _____ (State _____) do believe

this/these applicant(s) to be a person of good moral value who make an honorable Patron of Husbandry,
and as such hereby recommend without reservation this applicant for Grange membership.

FOR SECRETARY'S USE

Application Fee \$ _____ Date paid _____

Date approved for membership _____ Date obligated/welcomed _____

Date new member information provided to State Grange _____

Member chose to pay dues ____ annually ____ quarterly ____ monthly

Mentor _____

MEETING INFORMATION



Location



Day(s)
& Time

ADDITIONAL CONTACTS



Local
President



State
Grange
Contact



National
HQ

1616 H St. NW, 11th Floor
Washington, DC 20006
(202) 628-3507
information@nationalgrange.org

www.nationalgrange.org

Membership/Leadership Director
Amanda Brozana Rios
(301) 943-1090
abrozana@nationalgrange.org

*In essentials, unity;
In non-essentials, liberty;
In all things, charity.*



WELCOME TO
THE GRANGE

Application and New Member Pack

GET ORIENTED



LOCAL MENTOR

Name _____

Phone _____

Email _____

MEMBER BENEFITS

Grangers enjoy a number of discounts and custom services as part of their membership. Go to nationalgrange.org/benefits for the most up-to-date information.

Create a profile by providing the annual word: _____

DUES

Individual fraternal members of this Grange pay \$_____ per year. These dues include \$14 National and \$_____ annual State Grange dues.

STAY INFORMED

The National Grange and State Granges produce informative material and provide guidance for members and Granges that can help orient and connect us all.

Subscribe to the National Grange's quarterly magazine, Good Day!, for only \$16 per year for issues in print (nationalgrange.org/gooodday) or digitally (issuu.com/grangegoodday).



APPLICATION FOR MEMBERSHIP

TYPE ___ Individual ___ Family (# in household _____) *Others will be added to back*

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

By providing your email address, you agree to allow your local, State and National Grange to send you periodic updates.

MEMBER DETAILS

Occupation _____

Hobbies/Areas of interest _____

How did you learn about Grange?

Check what interested you most in Grange:

- ___ Fellowship
- ___ Grassroots Advocacy
- ___ Community Service
- ___ Entire family can be involved
- ___ Agricultural & educational programs
- ___ Benefits & discounts

I/we hereby apply for membership in

Grange # _____ *and attest that I/we 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/we promise a faithful compliance with the By-laws of this Grange and the Constitution and By-laws of the State and National Granges. I/we have not previously applied for membership in this or any other Grange during the past six months.*

SIGNATURE(S) OF APPLICANT(S)