

## **WHAT IS THE POMONA GRANGE IN MAINE?**

1. The Fifth Degree of the Order where the lesson of “Perseverance” is stressed, the next step in the journey following the Subordinate Grange.
2. A liaison between the Subordinate and State Granges.
3. A body which works to “strengthen and aid” the Subordinate Granges within its jurisdiction.
4. The legislative branch of the Order where many of the resolutions originate which are to be acted upon at State Grange.
5. A body of the Order which generally meets on a monthly basis, where members of the various Granges in the area have an opportunity to get to know each other, network with one another and form lasting bonds.

**HELP THE GRANGES  
IN YOUR AREA!**

**JOIN THE POMONA  
GRANGE TODAY!**

**FOR MORE INFORMATION  
CONTACT:**

**OR**

**ANY POMONA GRANGE MEMBER IN  
YOUR SUBORDINATE GRANGE**

**OR**

**MAINE STATE GRANGE  
146 STATE STREET  
AUGUSTA, MAINE 04330  
207-623-3421  
mainestategrange@myfairpoint.net**



**APPLICATION FOR  
MEMBERSHIP**

**POMONA GRANGE**

**ORDER OF  
PATRONS OF HUSBANDRY**



**POMONA GRANGE -- APPLICATION FOR MEMBERSHIP**

[ ] Application or [ ] Affiliate \$1.00 fee plus dues for current year \$ \_\_\_\_\_ Total \$ \_\_\_\_\_  
OR  
[ ] Reinstatement \$2.00 fee plus dues for current year \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

To the Officers and Members of \_\_\_\_\_ Pomona Grange No. \_\_\_\_\_, County of \_\_\_\_\_, State of Maine: I \_\_\_\_\_,

a member of \_\_\_\_\_ Subordinate Grange No. \_\_\_\_\_ respectfully petition to be admitted and enrolled as a member of your Pomona Grange.

In presenting this petition I am influenced by no other motive than a desire to unite with others in elevating and advancing the interests of Husbandry, and receiving in return such benefits and advances as may accrue to all who belong to the Order. Should my petition be granted, I promise a faithful compliance with the by-Laws of your Pomona Grange, and the constitution and laws of the State and National Grange.

For reinstatement: I was formerly a Member of \_\_\_\_\_ Pomona Grange No. \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_.

Date \_\_\_\_\_, 20\_\_\_\_ Fraternaly, \_\_\_\_\_  
Phone number \_\_\_\_\_ Mailing address \_\_\_\_\_  
E- Mail address \_\_\_\_\_

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

I certify that \_\_\_\_\_ is a member in good standing as stated above.

Signed \_\_\_\_\_  
(Subordinate Master or Secretary)