

REINSTATEMENT APPLICATION SUBORDINATE GRANGE

To the Officers and Members of _____ Grange No. _____:

I _____
St/ RR _____ Town _____
State _____ Zip Code _____ County _____
formerly a member of _____ Grange No. _____
in _____ County, State of _____,
being _____ years of age and by occupation a _____,
respectfully petition to be reinstated and enrolled as a member of the Grange.
Fee \$2.00. Dues for current year _____. Total paid _____.

In presenting this petition, I am influenced by no motive other than a desire to unite with others in elevating and advancing the interest of Husbandry and Rural Life and receiving in return such benefits and advantages as may accrue to all who belong to the Order. I promise a faithful compliance with the Bylaws of this Grange, and the Constitution and Laws of the State and National Granges.

Date: _____ Signature _____

REINSTATEMENT APPLICATION POMONA GRANGE

To the Officers and Members of _____ Pomona No. _____:

I _____
St/ RR _____ Town _____
State _____ Zip Code _____ County _____
a member of _____ Subordinate Grange No. _____,
formerly a member of _____ Pomona No. _____
in _____ County, State of _____,
respectfully petition to be reinstated and enrolled as a member of this Pomona.
Fee \$2.00. Dues for current year _____. Total paid _____.

Date: _____ Signature _____

* * * * *

I hereby certify that _____ is a member in good standing as stated above.

Signed _____

(Master or Secretary)