

LIFETIME MEMBERSHIP APPLICATION

Name _____ Date of Birth _____

Street _____ City _____ State _____ Zip _____

Email Address _____ Phone _____

I am currently a member in good standing of:

_____ in _____
Grange Name & No. County

Enclosed is my one-time fee of \$_____ to become a **LIFETIME MEMBER** of the Grange. I understand that, with this payment, I am not responsible to pay any additional dues to the Subordinate Grange, as the State Grange will credit an appropriate amount per quarter to my Subordinate Grange in lieu of my dues.

OR

Enclosed is my first payment of \$_____ (minimum-1/8 [one-eighth] of the total fee due). I agree to complete payment of the remaining balance within the next 24 months. (I acknowledge that I must make quarterly payments and that an extra \$5.00 fee for each quarter will accrue until full payment is received.) I also understand that, with this agreement, I am not responsible to pay any additional dues to the Subordinate Grange.

As a *LIFETIME MEMBER*, I will be able to continue to participate in all Grange activities and enjoy the benefits of the Grange membership so long as I remain on the active membership rolls of a Subordinate Grange.

Signed _____ Date _____

The lifetime fee for the different age groups is as follows Effective January 1, 2016:

Members under 25 years of age	\$1,050.00
Members 25 years through 34 years	\$900.00
Members 35 years through 54 years	\$750.00
Members 55 years through 64 years	\$625.00
Members 65 years and over	\$550.00

Please make check payable to the Pennsylvania State Grange and send application and fee to:
Debra Campbell, State Secretary
1791 Shull Hill Rd.
Newport, PA 17074

My signature certifies that the above is a member in good standing.

_____ Subordinate Grange Secretary Date _____

Grange Name _____ No. _____ Place
Grange Seal
Here

To be completed by the PA State Grange Secretary—Certificate No. _____ Date _____