



COMMUNITY GRANGE ORGANIZATION APPLICATION

The National Grange of the Order of Patrons of Husbandry

Instructions to organizing President or Deputy

Presidents or Deputies organizing Granges should send a paper copy of this application to the Secretary of the State Grange who will send the application AND charter fee to:

The National Grange
1616 H Street NW
Washington, D.C. 20006-4999

The new Grange will receive all necessary documents and a Grange kit. In the meantime, they can be electing officers, appointing committees, preparing their meeting place and balloting for candidates. The Grange kit will be sent to the President of the new Grange unless otherwise instructed. The Charter will be issued by the National Grange and forwarded to your State Grange for delivery, recording and presentation to the new Grange.

REMEMBER: Charter members are those persons whose names are on the application and whose fees are paid at the time of organization (see National Grange Digest of Laws Section 1.4.1 and 4.3.1).

The list of charter members should be completed when this application is sent in.

The undersigned have organized a Community Grange in the Town or Township of

_____ county/parish of _____
state of _____ and most respectfully ask for a charter and the
necessary documents of a Grange and enclose the fee of \$50.00 for the same.

Name of Grange _____

Approved by State President _____

Organized by President or Deputy _____

Address _____ Date of Organization _____

Number of Charter Members Total _____ Male _____ Female _____

Check here if this is a historic Grange name & number out of use for an extended period of time	☐
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OFFICERS ELECTED

President _____ E-mail _____

Address _____ Phone _____

Lecturer _____ E-mail _____

Address _____ Phone _____

Secretary _____ E-mail _____

Address _____ Phone _____

Treasurer _____ E-mail _____

Address _____ Phone _____



Roster of Charter Members

Community/Subordinate Grange of the National Grange:		State	County
Name: (LAST, FIRST, MI) Please Print		Date Joined:	Phone No:
Street Address:		Date of Birth:	Email: PLEASE PRINT CLEARLY
City, State, Zip		Occupation:	Check if retired:
By signing the Roster, I agree to abide by the By-Laws of this Grange, the State Grange and the Digest of Laws of the National Grange.		Signature X	
Name: (LAST, FIRST, MI) Please Print		Date Joined:	Phone No:
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Instructions:

Attach to the Organization or Re-Organization Application. Submit all pages to:
The National Grange, 1616 H St. NW, Washington DC 20006

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