

Part 2 Members Gained

Grange:	Grange No.	Year:	Quarter:

[illegible]

Member Gained #2	Name: (Last, First, MI)				Date Joined:		Occupation:			
	Street Address:				Date of Birth:		Email:			
	City, State, Zip				Phone No:			Retired:		
								<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Gained By: (Check which applied)				Type Member: (Check which applied)						
Application	Demit	Reinstatement	Error	Fraternal	Gold Sheaf	Affiliate	Junior 1+	Associate	Family	

Member Gained #3	Name: (Last, First, MI)				Date Joined:			Occupation:		
	Street Address:				Date of Birth:			Email:		
	City, State, Zip				Phone No:			Retired:		
								<input type="checkbox"/> Yes <input type="checkbox"/> No		
Gained By: (Check which applied)				Type Member: (Check which applied)						
Application	Demit	Reinstatment	Error	Fraternal	Gold Sheaf	Affiliate	Junior 1+	Associate	Family	

Member Gained #4	Name: (Last, First, MI)				Date Joined:			Occupation:											
	Street Address:				Date of Birth:			Email:											
	City, State, Zip				Phone No:			Retired:											
								<input type="checkbox"/> Yes <input type="checkbox"/> No											
Gained By: (Check which applied)				Type Member: (Check which applied)															
Application		Demit		Reinstatment		Error		Fraternal		Gold Sheaf		Affiliate		Junior 1+		Associate		Family	

Member Gained #5	Name: (Last, First, MI)				Date Joined:		Occupation:			
	Street Address:				Date of Birth:		Email:			
	City, State, Zip				Phone No:		Retired:			
							<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Gained By: (Check which applied)				Type Member: (Check which applied)					
Application	Demit	Reinstatement	Error	Fraternal	Gold Sheaf	Affiliate	Junior 1+	Associate	Family	