



## Instructions

Submit by mail to: Lillian J.D. Booth, State Secretary,  
 California State Grange, chartered  
 PO BOX 1442 Paradise, CA 95967  
 (530) 872-8719

<b>1</b>	Name:	A	Date Joined:	B	Member #	C
	Address:	D	Date of Birth:	E	Type Member:	F
			Phone #:	G	Retired:	H Yes [ ] No [ ]
	Email:	I	Occupation:	J		

- A** Name: Enter first name, middle initial (if known) and last name.
- B** Date Joined: Enter as MM/DD/YYYY This is a required field
- C** Member # If a membership number was previously assigned by the State Grange please enter it. If not known, please leave blank.
- D** Address: Street address, City, State and Zip Code.
- E** Date of Birth Enter as MM/DD/YYYY - if full date of birth is not known, enter Year of birth only, if known.
- F** Type of Member F = Fraternal, Af = Affiliate, As = Associate or JG = Junior
- G** Phone # Format (###) ###-####
- H** Retired Check yes or no, if known
- I** Email Address Enter email address.
- J** Occupation Enter occupation, if known. If retired, enter previous occupation.

**You may submit your membership list using a spreadsheet program such as Microsoft Excel. This data can be uploaded to the membership database.**

**Use the following titles for the columns:**

Last Name	First Name	MI	Date Joined:	Member #	Street Address	City
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Continue after City.....

State	Zip	DoB	Type of Member	Phone #	Email Address	Occupation	Retired
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Grange Name:	Grange No.	Date Submitted:
Name of Secretary:	Phone No.	Received by State Grange:
Email Address:		

### List of Grange Members

<b>1</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>2</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>3</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>4</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>5</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>6</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	
<b>7</b>	Name:	Date Joined:	Member #
	Address:	Date of Birth:	Type Member:
		Phone #:	Retired: Yes [ ] No [ ]
	Email:	Occupation:	

<b>Page 2</b>		Grange Name:		Grange No.		Date Submitted:	
<b>8</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>9</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>10</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>11</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>12</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>13</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>14</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>15</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				

<b>Page 3</b>		Grange Name:		Grange No.		Date Submitted:	
<b>16</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>17</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>18</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>19</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>20</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>21</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>22</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>23</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				

<b>Page 4</b>		Grange Name:		Grange No.		Date Submitted:	
<b>24</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>25</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>26</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>27</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>28</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>29</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>30</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				
<b>31</b>	Name:		Date Joined:		Member #		
	Address:		Date of Birth:		Type Member:		
			Phone #:		Retired:	Yes [ ]	No [ ]
	Email:		Occupation:				

<b>Page #</b> ____		<b>Grange Name:</b>		<b>Grange No.</b>		<b>Date Submitted:</b>	
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				
Name:			Date Joined:			Member #	
	Address:			Date of Birth:			Type Member:
				Phone #:			Retired:
Email:			Occupation:				