



SONS of NORWAY

Join Today

Thank you for your interest in joining Sons of Norway. Please fill out this form, printing clearly, and return along with payment to:

Sons of Norway
1455 West Lake Street
Minneapolis, MN 55408-2666
www.sonsofnorway.com
Toll free 800.945.8851



If known, please provide your:

District # _____ Lodge # _____ Lodge Name _____ Membership # (for office use only) _____

Membership Categories

OPTION 1 **Individual Membership** \$60 per year

OPTION 2 **Family Membership** \$95 per year
Add family members, next page

Note: You can add family members to an existing membership at www.sonsofnorway.com

Complete for Options 1 and 2.

Name _____
First Middle Last

Date of birth ____/____/____ Male Female **Norwegian by** Birth Descent Marriage/Spouse Interest/Affiliation
MM DD YY

Mailing address _____
Street Apt./Unit/Suite # City State Zip

Billing address _____
if different from mailing address Street Apt./Unit/Suite # City State Zip

Phone _____ Email _____

By providing my email address, I give Sons of Norway permission to email newsletters, alerts, correspondence related to my membership, and special offers from Sons of Norway partners.

