

Toll Free (800) 945-8851 • Business (612) 827-3611 • Fax (612) 827-0658

REPORT OF NEW MEMBERS

Lodge Name and No. _____ Date ____

Use this form to k List all new mem	teep track of you bers or transfers	or new members, s accepted into m	including those wh nembership in you	no have r lodge	purchas since las	ed insu	rance. t.	
			ONLY AND DOES N ONAL HEADQUART		D			
Phone	No.	Na	ume in Full		Date Elected	Local Lodge Dues*	Total Remittance	
	1.							
	2.							
	3.							
	4.							
	5.							
	6.							
	7.							
	8.							
	9.							
	10.							
					TOTAL			
	MEMBER	RS ACCEPTED	BY TRANSFER					
Name in Full			Date Accepted		Transferred From Lodge Name Lodge No.			