## Please forward this completed form to: linnealodge@gmail.com

Local Lodge Secretary: Keep this section

Annual Membership Dues (\$35) will be due once the application has been processed.



## Vasa Order of America

A Swedish-American Fraternal Organization

## **Application for Membership**

(Please Print or Type)

□ New Member□ Previous Member□ Transfer□ Dual

Local Lodge:	Linnea Lodg	je <u> </u>	N	o504	DL No	. 12	Date:	
Name:							Male	Female
Last		First		Mi	ddle			
				G:			- Co	7:
Phone: Street	F	E-mail:		City			Stat	e Zip
Birth Date	Birth Place:				O	ccupation:		
Spouse:	(	Children:						
Interests and Skills:								
	□ Norway □ Den							
	Vasa Lodge							
	<u> </u>							
	ee:							
contributions to the Ed	designated at \$1.50 per lucation Fund are deduct Order of America are no	ible under Sec	etion 170(c)	(4) of the I	nternal Ro	evenue Coo	le. All other con	tributions or
Secretary's Use only Member No.	y: Initiation Date:		Ini	tiation Fee	Paid: \$ _		_ Dues Paid: \$ _	
Termination Date:	Reason:							
NT.	: Send this section to Di	•	~					
								☐ Female
Last		First						
Last		First		Mi				
Last Address: Street		First City		Mi	ddle	Zip	□ Male Phone:	
Address: Street Birth Date E-mail:	Birth Place:	First City		Mi S Spons	ddle state	Zip v you heard	□ Male _ Phone:	
Last  Address: Street  Birth Date  E-mail: Applicant's emai	Birth Place:	First City		Mi S Spons	ddle state sor or how	Zip y you heard Distric	□ Male _ Phone:	12
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local	Birth Place:  I address Lodge Secretary (require	First City	Local l	Mi Spons Lodge <u>Li</u> I	ddle state sor or how	Zip v you heard Distric	□ Male _ Phone: l of VOA t Lodge No	12 _ No. <u>504</u>
Last  Address:  Street  Birth Date  E-mail:  Applicant's emai  Signature:  Local  New Member   Pr	Birth Place: l address l Lodge Secretary ( <b>require</b> revious Member □ Dua	First  City  d)  Transfe	Local l	Mi S Spons Lodge Lir	ddle state sor or how	Zip y you heard Distric	□ Male Phone: l of VOA t Lodge No	12 _ No. <u>504</u> No
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local New Member  Pr  Local Lodge Secretary	Birth Place:  I address Lodge Secretary (require	First  City  d)  Transfe	Local l	Mi S Spons Lodge Lir	ddle state sor or how	Zip y you heard Distric	□ Male _ Phone: l of VOA t Lodge No  nit. Date:	12 No. 504
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local  New Member   Pr	Birth Place: l address l Lodge Secretary ( <b>require</b> revious Member □ Dua	First  City  d)  Transfe	Local l	Spons Lodge Lin	ddle state sor or how	Zip y you heard Distric	□ Male _ Phone: l of VOA t Lodge No  nit. Date:	12 _ No. <u>504</u> No
Last  Address: Street  Birth Date  E-mail: Applicant's email  Signature: Local New Member Pr  Local Lodge Secretary  Name: Last	Birth Place: l address  I Lodge Secretary (require revious Member □ Dua	d) al □ Transfe  Sa Star Circul	Local ler, from LL	Spons Lodge Lift Lodge Mem	otate sor or how nnea Lo	Zip y you heard Distric odge I	□ Male _ Phone: l of VOA t Lodge No  nit. Date:	No. 504  No  required)  □ Female
Last  Address: Street  Birth Date  E-mail: Applicant's email  Signature: Local  New Member Pr  Local Lodge Secretary  Name: Last  Address: Street	Birth Place:  I address  I Lodge Secretary (require revious Member	First  City  d)  al □ Transfe	Local ler, from LL	Spons Lodge Lin  ager Mem	tate sor or how	Zip v you heard Districe odge I		No. 504  No  required)  □ Female
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local New Member Pr  Local Lodge Secretary  Name: Last  Address: Street  Birth Date	Birth Place:  I address  I Lodge Secretary (require revious Member □ Duate: Send this section to Va	First  City  d)  Transfe  Sa Star Circul  First  City	Local ler, from LL	Spons  Spons  Lodge Lil  Lodge Mem  Mi  Sponso	itate sor or how nnea Lo her No. ddle state or or how	Zip y you heard Districe odge I  Zip you heard		No. 504  No  required)  □ Female
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local New Member Pr  Local Lodge Secretary  Name: Last  Address: Street  Birth Date  E-mail: Applicant's emai	Birth Place:  l address  l Lodge Secretary (require revious Member □ Dua revious Member □ Dua revious to Va	First  City  d)  al	Local ler, from LL	Spons  Lodge Lin  Lodge Mem  Mi  Sponso	nnea Lo	Zip y you heard Districe Ddge  Zip you heard Districe		No. 504  No  required)  □ Female
Last  Address: Street  Birth Date  E-mail: Applicant's emai  Signature: Local New Member Pr  Local Lodge Secretary  Name: Last  Address: Street  Birth Date E-mail: Applicant's emai	Birth Place:  I address  I Lodge Secretary (require revious Member □ Duate: Send this section to Va	First  City  d)  al	Local ler, from LL	Spons  Lodge Lin  Lodge Mem  Mi  Sponso	nnea Lo	Zip y you heard Districe Ddge  Zip you heard Districe		No. 504  No  required)  □ Female