

District 1 Sons of Norway Masse Moro Scholarship Invoice

Lodge Name _____ Number 1- _____ City _____ State _____

Scholarship Chair _____ Address _____

City: _____ State: _____ Zip _____ Phone _____ Email _____

Your local Lodge Scholarship Chairperson must fill out this Masse Moro Scholarship Invoice along with the Lodge portion of your Lodge's Masse Moro registration forms. All originals, and checks made out to **Nordic Legacy Foundation** must be sent to the District Five Youth Director to reserve the camper's spot. A copy of this Invoice must be sent to the First District Scholarship Coordinator by May 17th for District level Scholarships to be validated. Do NOT send checks or original forms to the First District Scholarship Coordinator. Fill out all columns, including the parent portion if possible.

Applicant's Name and Address. (Use more than one line if needed)	1 st District \$\$	Local Lodge \$\$	Parents \$\$	Total \$\$
Totals:	\$ _____	\$ _____	\$ _____	\$ _____

1st District \$\$: Total amount of 1st District Scholarship \$\$ for each camper. Local Lodge \$\$: Amount of Local Lodge Scholarship \$\$ being allocated to each camper
Parents \$\$: Amount payed by Parents Total \$\$: The Totals columns vertically and horizontally must be filled out and should equal the same amount.

Chairperson's Signature: _____ **Date:** _____