Lodge Event Reimbursement Form



Lodge Information: Lodge No.: _____ Lodge Name: _____ Lodge President's Name: Phone No.: Email Address: **EVENT INFORMATION:** Event Name: _____ Event Location: ____ Type of Event (i.e. community event, festival of nations, Chamber of Commerce events): Please describe the event (in 50 words or less): Has the lodge participated in this event in the past? \square Yes \square No How did the lodge learn about this event? _____ How many people attended the event? _____ How many members participated? _____ Who coordinated your lodge's participation in the event? Did you request any assistance or materials from Sons of Norway Headquarters? □Yes \square No If so, please describe:

form continues on second page

How many new members have joined your lodge in the month following the event?_____

If so, how:

Number of new members recruited at the event?

Did the lodge Financial Benefits Counselor Participate?

Yes

No

Lodge Event Reimbursement Form (continued)

Please include a short narrative (under 200 words) from t	the lodge president or event coordinator describing the impact of
the event on your lodge. Please include specific successes	and challenges the lodge encountered.
	imbursement (examples can include travel expenses, venue/booth
rental, supplies, etc.)	
Item for Reimbursement:	Cost:
	Total: