



MASSE MORO CAMP

July 17 – 30, 2022 VELKOMMEN!

The cost for our 2 week all-inclusive Nordic Heritage Camp is \$1000

Please include your \$100.00 non-refundable registration fee with this form.

Complete (please print clearly) and mail the completed application materials to:
Sandra Olson, District 5 Youth Director, 733 250th Street, Woodville, WI 54028

Contact Information: (715) 698-3433; e-mail: solsondist5@gmail.com

Make check to: **Nordic Legacy Foundation** or use the PayPal electronic option,
available under Admissions Information tab on the www.Masse Moro.org website. Tusen Takk!

Sons of Norway Affiliation: District 1 District 5 None Other _____

Name of Camper: _____ Date of Birth: _____

Address: _____ Gender (circle) Female Male

City: _____ State: _____ Zip Code: _____

Name of Parent(s) or Legal Guardian(s): _____

Phone Number: _____ Contact Name: _____

Work Contact: _____ Contact Name: _____

E-mail: _____

Norwegian Name at camp, if a previous attendee: _____ Age as of first day of camp _____

Sons of Norway Member/Sponsor Name: _____ Member # _____

Name and Address of Lodge Relationship to Camper

Authorized person to pick up child on last day of camp? _____ # _____

Cabin request (name of friend or sibling): _____

SELECT A SIZE OF CAMP T-SHIRT (adult sizes only):

Select the best fit t-shirt size for your child: S M L XL 2XL 3XL

DIET: Traditional Diet ____ Special Diet ____ Describe _____

How did you hear about Masse Moro? (Circle all that apply): Returning Camper Friend Relative

Ad in Viking Mag Lodge Info Other (explain): _____

“I will do my best to be an active and cooperative participant at Masse Moro.”

CAMPER SIGNATURE: _____ DATE _____

“I give my permission for Camp photos and videos of this child to be used in marketing and promoting Masse Moro.”

PARENT/LEGAL GUARDIAN SIGNATURE: _____ DATE _____

Note: For us to better plan for your child’s camping experience, please return by April 1, 2022!



IMPORTANT CAMPER INFORMATION – 2022
(Camper must be at least 9 and under 16 years old on the first day of camp)



Please help your child to have an enjoyable and healthy camp experience by providing the answers to the following concerns. Thank you for assisting our counselors and staff in getting acquainted with your child and in meeting his/her needs more effectively. If necessary, please attach an additional sheet of paper detailing specific concerns.

NAME OF CAMPER: _____ **Age on JULY 17, 2022:** _____

Names and ages of camper’s siblings: _____

Has this camper attended Masse Moro before? _____ If so, when: _____

Indicate the names of other camps this child has attended. _____

Was their camp experience positive? _____ Comments: _____

List any languages this child speaks. _____

Has this child traveled outside of the U.S. _____ If yes, when and where? _____

What skills or abilities does this child wish to learn at camp? _____

Health/behavior concerns that could affect camp participation: _____

Please check the items below that best describes your child:

Personal Characteristics:	Outgoing	Inquisitive	Moody	Quiet	Shy
	Humorous	Confident	Nervous	Insecure	Friendly

Physical Coordination:	Excellent	Good	Fair	Poor
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Relates to Peers:	Very well	Adequately	With Difficulty
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Relates to Adults:	Very well	Adequately	With Difficulty
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Sleep Habits:	Sound Sleeper	Restless Sleeper	Sleep Walker
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Previous Group Experiences: Scouting Music Sports Other _____

Participates in Group Activities: Easily With Encouragement Reluctantly; Explain: _____

Indicate any activities that may cause stress or anxiety: _____

Explain: _____

Known fears or weaknesses: _____

Special needs: _____

Please indicate any recent traumatic or other stressful event(s) that our counselors should be aware of:

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