

# DR. ROB MORRIS AWARD PROGRAM

Sec. 79A **DR. ROB MORRIS AWARD PROGRAM.** Subordinate Chapters may voluntarily participate in the Dr. Rob Morris Award Program by which recognition may be given for special service to a Sister or Brother who is a member of the subordinate Chapter and who has not previously served in the capacity of a Worthy Matron or Worthy Patron for a sufficient period as to be recognized as a "Past Matron" or a "Past Patron", provided however, no person currently serving as Worthy Matron or Worthy Patron shall be considered for this award. NO MORE THAN ONE SUCH MEMBER may be so recognized by each subordinate Chapter in any year. **Such recognition shall be memorialized by a Dr. Rob Morris Award Certificate and Pin.** The subordinate Chapter shall purchase such certificate and pin from the Grand Chapter. The method of selecting recipients and the manner of presentation shall be determined by the subordinate chapter giving the award.

## ORDER FORM for DR. ROB MORRIS AWARD

\_\_\_\_\_ Chapter No. \_\_\_\_\_

wishes to present a Dr. Rob Morris Certificate of Merit to:

\_\_\_\_\_ (Please Print Name) \_\_\_\_\_ (Membership Number)

which will be presented on \_\_\_\_\_, 20\_\_\_\_\_

Send this form and your check made payable to "GRAND CHAPTER OF CALIFORNIA" to the Grand Chapter office, 16960 Bastanchury Road, Suite E, Yorba Linda, California 92886-1711.

Lapel Pin and Certificate \$6.00 \$ \_\_\_\_\_

Charm and Certificate \$6.00 \$ \_\_\_\_\_

Replacement Lapel Pin \$4.00 each \$ \_\_\_\_\_

Replacement Charm \$4.00 each \$ \_\_\_\_\_

Replacement Certificate \$2.00 each \$ \_\_\_\_\_

Total amount enclosed \$ \_\_\_\_\_

Check Number \_\_\_\_\_

Mail to:

\_\_\_\_\_  
\_\_\_\_\_

(Seal)

\_\_\_\_\_ City State Zip

\_\_\_\_\_  
Chapter Secretary