SCHEDULE B
INSTRUCTIONAL PROGRAMS, FACILITY RENTALS AND EDUCATIONAL FIELD TRIPS

BETWEEN: Calgary Roman Catholic Separate School District No. 1 as represented by:

School Name and Address ____________________________________________

__________________________________________

School Contact Person ____________________________________________

AND The Governors of the University of Calgary as represented by:

University of Calgary Contact Person ________________________________

University of Calgary Department _____________________________________

A. The above school wishes to use the following University services:(check the applicable boxes):

☐ instructional program without equipment rental       ☐ facility rental
☐ instructional program with equipment rental          ☐ educational field trip

B. This service includes the following (provide description of instructional program educational field trips, and/or facility rental)

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Date(s)__________________________________ Cost_________________

No. of Students________________________

Instructions Provided By School to Students:   ☐ Yes ☐ No

Nature of Instructions Provided: (attach a copy) ________________________________

_____________________________________________________________________________________

Specific Additional Arrangements/Agreements ________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

This Subsequent Agreement remains in effect only with respect to the use and service described in A and B above for the dates referred to above.

Calgary Roman Catholic Separate School District No. 1

The Governors of the University of Calgary

_______________________________  ___________________________________
Signature                  Signature

_______________________________  ___________________________________
Print Name & Title          Print Name & Title