SCHEDULE B – SUBSEQUENT AGREEMENT
INSTRUCTIONAL PROGRAMS, FACILITY RENTALS AND EDUCATIONAL FIELD TRIPS

BETWEEN: SCOUTS CANADA as represented by:

GROUP NAME: __________________________________________________________

ADDRESS: ____________________________________________________________

CONTACT PERSON: ___________________ PHONE NUMBER: _______________

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

FACULTY/DEPARTMENT: ________________________________________________

UNIVERSITY CONTACT PERSON: _________________________________________

PHONE NUMBER: ______________________________________________________

A: THIS GROUP WISHES TO PARTICIPATE IN THE FOLLOWING PROGRAM(S):
(check boxes):
☐ Instructional Program  ☐ Instructional Program and equipment rental
☐ Facility Rental        ☐ Educational Field Trip

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

_______________________________________________________________________________________
_______________________________________________________________________________________

DATE(S): ________________ COST: ___________ NO. OF STUDENTS: ______

INSTRUCTIONS PROVIDED BY GROUP TO STUDENTS  YES ☐ NO ☐

NATURE OF INSTRUCTIONS PROVIDED (attach a copy if additional space required):
_______________________________________________________________________________________
_______________________________________________________________________________________

SPECIFIC ADDITIONAL ARRANGEMENTS/AGREEMENTS
_______________________________________________________________________________________
_______________________________________________________________________________________

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

SIGNED BY:      SIGNED BY:
SCOUTS CANADA  The Governors of the University of Calgary
as represented by:

__________________________________ ___________________________________
Group Commissioner’s Signature      Signature