SCHEDULE B

INSTRUCTIONAL PROGRAMS, FACILITY RENTALS AND EDUCATIONAL FIELD TRIPS

BETWEEN: West Island College Society of Alberta 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  ☐ instructional program with equipment rental
☐ facility 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.

FOR:
West Island College Society of Alberta  The Governors of the University of Calgary

_______________________________  ___________________________________
Signature       Signature

_______________________________  ___________________________________
Print Name & Title       Print Name & Title