

**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):

- | | |
|---|---|
| <input type="checkbox"/> instructional program without equipment rental | <input type="checkbox"/> facility rental |
| <input type="checkbox"/> instructional program with equipment rental | <input type="checkbox"/> 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