



ACCESSIBILITY:

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Date of Application (yyyy-mm-dd): _____

APPLICANT'S SCHOOL

Name of School: _____ Phone: _____

RETREAT INFORMATION

Retreat Dates (yyyy-mm-dd): _____ Location: _____

TOTAL ASSISTANCE REQUESTED (FOR A MAXIMUM OF THREE STUDENTS)

What is the total number of students (three maximum) requiring assistance for the retreat fee? _____

Mount Mary

\$210.00 (3 days/2 nights) X # of students: _____ = \$ _____
 • Regular schedule

Teacher Cost-\$147.00

\$150.00 (2 days/1 night) X # of students: _____ = \$ _____
 • Students depart at 1:00 p.m. on their second day with no dinner

Teacher cost-\$100.00

\$167.00 (2 days/1 night) Extended Day X # of students: _____ = \$ _____
 • Students depart after dinner

Teacher cost-\$115.00

\$66.00 (1 day) Extended Day X # of students: _____ = \$ _____
 • Includes lunch and dinner

Teacher cost-\$34.00

Additional bussing costs. Schools choose to utilize SGF and fundraising (CSAC, etc.) to offset bussing costs.

Other Amounts

of students: _____ X \$ _____ = \$ _____

of students: _____ X \$ _____ = \$ _____

of students: _____ X \$ _____ = \$ _____

Total Assistance Requested: \$ _____

Signature of Principal (handwritten or typed)

Date (yyyy-mm-dd)

Signature of Chaplain (handwritten or typed)

Date (yyyy-mm-dd)

Office Use only:

Budget #: _____

Completed by: Principal

Distribution: Principal → Chaplain

Retention: 1. School; 2. Chaplain (Event +1 Year)