

Form 261

Request for Board Financial Support



School Name: _____

School Contact: _____

Event: _____

Event Address: _____

Event Dates: _____

Distance Travelled (one-way): _____

Number of Supervisors and Names: _____

Number of Competitors: _____

Cost Breakdown:

1. Transportation Method & Company: _____

Cost of Return Trip: _____

2. Hotel

a. Hotel Name & Address: _____

b. Number of Nights: _____

c. Number of Rooms: _____

d. Cost per Room: _____

Total Hotel Cost (bxcxd): _____

3. Food Cost/day x no. of people x no. of days: _____

4. Competition Entry Fees: _____

TOTAL COST (Transportation + Hotel + Food + Entry Fees): _____

Money Raised:

1. Competition / Entry fees received from students: _____

2. Donations / Sponsorships received: _____

Shortfall Requested:

Total cost **minus** sponsorships, donations and competition / entry fees collected: _____

****Maximum financial support will not exceed \$2,000 per event nor \$200 per participant***

Signature: _____
Principal

Signature: _____
Superintendent of Corporate Services

Date: _____

Date: _____