



VANCOUVER COLLEGE

REQUEST FOR FAMILY DISCOUNT 2026/2027 SCHOOL YEAR

FAMILY NAME: _____ TUITION ACCOUNT #: _____

Name of Sons	Grade
1.	
2.	
3.	
4.	
5.	

Please note: Any amount taken as a discount will be reflected as a decrease in the charitable portion of your tuition for which you receive a tax receipt.

☐ I would like to request a family discount for the following reason:

Please indicate here the family discount needed by your family:

(Note: The 2025/26 rate is indicated, and is subject to change)

- | | | |
|--------------------------|---|--|
| ☐ | Family Discount for 2 nd son | \$1,600 |
| ☐ | Family Discount for 3 rd son | \$3,600 |
| ☐ | Family Discount for 4 th son | \$5,650 |
| ☐ | Family Discount for 5 th son | No tuition payable for 5 th son |

Signature: _____ Requested by: _____

(pls. print name)

Date: _____

Completed forms can be submitted electronically to accounting@vancouvercollege.ca or as a hard copy to the Main Office.