



Karen and Gary Simkin Family

## Child Development Centre

Jewish Community Centre of Greater Vancouver

December 2018

Dear Families:

Registration for Shalom Aleph and Shabbat Shalom Preschool Programs for 2 year olds and Bet Preschool for 3 and 4 year olds for the school year 2019/2020 begins on Monday, January 14, 2019.

In this package you will find:

- Priority Registration Information
- Preschool Application Forms
- Withdrawal and Cancellation Policy Form
- Parent Agreement

February 19, 2019: This week, you will receive confirmation of acceptance in the program or you will be notified of your status on the wait list. Please inform us of any contact information changes.

June 3, 2019: Your payment plan must be in place. Payments will begin on August 25.

July 15, 2019: An Information Package will be emailed to you with required forms to be completed.

August 25, 2019: First fee installment payment is due.

Completed forms can be left at the JCC Member & Guest Services desk, beginning Monday, January 14, 2019, **at or after 9:00 am**, according to your Priority Category. Please make sure that you submit all forms with your deposit. **Incomplete forms will not be accepted.**

Should you have any questions please call me at 604.257.5162 or stop by my office. My email is [jtrickett@jccgv.bc.ca](mailto:jtrickett@jccgv.bc.ca).

Warmly,

Jennifer Trickett

Director, Karen and Gary Simkin Family Child Development Centre





Karen and Gary Simkin Family

**Child Development Centre**

Jewish Community Centre of Greater Vancouver

**PRIORITY REGISTRATION FOR SEPTEMBER 2019  
Bet Preschool, Aleph and Shabbat Shalom  
Preschool Programs  
2019-2020**

**1<sup>st</sup> priority begins Monday, January 14, 2019**

JCC members whose children are presently enrolled in Bet Preschool, Shalom Aleph and Shabbat Shalom.

**2<sup>nd</sup> priority begins Wednesday, January 16, 2019**

JCC members whose children have attended licensed programs at the Simkin Family Child Development Centre.

**3<sup>rd</sup> priority begins Friday, January 18, 2019**

JCC members whose children have never attended licensed programs at the Simkin Family Child Development Centre.

**4<sup>th</sup> priority begins Monday, January 21, 2019**

Non-member alumni and non-members whose children are enrolled in licensed programs at the Simkin Family Child Development Centre.

**Open registration begins Wednesday, January 23 and is ongoing.**

**To apply for Preschool Programs**

- Applications are available online Monday, December 17, 2018.
- Deliver completed application forms to the Front Desk any time AFTER 9:00am on the day of your specific category or on any following day.
- No early applications will be accepted.
- Applicants will be notified as to their status the week of February 19, 2019.





# Jewish Community Centre of Greater Vancouver

Harry & Jeanette Weinberg Jewish Community Campus

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## JCCGV PRESCHOOL PARENT AGREEMENT 2019-2020

The following conditions apply and are agreed with respect to Shalom Aleph Preschool, Shabbat Shalom Preschool and Shalom Bet Preschool at the Jewish Community Centre of Greater Vancouver ("JCCGV, JCC, centre"). As a parent of a child/ren that is/are enrolled at the JCCGV Preschool, I accept and agree to the following:

### A. Financial \_\_\_\_ initial here

1. That my child/ren's preschool fees shall be paid according to the Preschool Registration, Withdrawal and Cancellation Form. Failure to keep payments up to date may result in a late payment fee of \$15.00 per month being levied.
2. That failure to pay preschool fees may result in notice by the JCCGV of withdrawal of preschool services. If outstanding fees have not been paid, and if a payment schedule has not been agreed to, I understand and agree that my account may be turned over to a Collection Agency.
3. The Preschool program runs for 10 months. If you do not complete the school year, the \$250 deposit is **not refundable or transferable** to other programs or persons. In the event that parents wish to withdraw their child from the program, **60 days written or emailed notice is required, by the 1<sup>st</sup> of any given month. There will be no 'pro-rates'**. Only after receiving the written or emailed notice will the JCCGV refund any remaining funds, which will be calculated from the end of the 60 day notice period. All funds will be forfeited if withdrawal is after March 1<sup>st</sup> of the current school year.
4. That a full month's fees must be paid for any part of a month when a child/ren of mine is away from the centre for illness or vacation.
5. Official receipts for preschool fees will be given upon request.

### B. Health \_\_\_\_ initial here

6. That I have read the "Health Policies & Procedures" in the parent handbook and agree to follow the stated rules.
7. That I update all health and emergency records for my child/ren.
8. That in order to safeguard the health of all children, the Director has the right to exclude a child from the centre without having to account for the reason(s) therefore.
9. That only medication prescribed by a physician, for which written prescription is provided to the Director in satisfactory form, will be administered to a child by centre staff. I will complete and sign a "Permission to Administer Medication" form whenever requested to do so.

### C. Safety and Well Being of the Child \_\_\_\_ initial here

10. That I will **sign my child/ren in and out each day**. I will notify centre staff if someone other than those authorized by me is authorized to pick up my child/ren.
11. That I list below ALL persons **NOT LEGALLY** permitted to pick up my child.

NAME

AGE

RELATIONSHIP

Copy of Supreme Court Order provided?

Yes \_\_\_\_ No \_\_\_\_

950 West 41st Avenue, Vancouver, BC Canada V5Z 2N7

Phone: 604.257.5111 Fax: 604.257.5119 Email: info@jccgv.bc.ca Website: www.jccgv.com



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\*Life Directors

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Gary Averbach, Chair

### Executive Director

Eldad Goldfarb

The JCCGV, the Director, or any employee shall not be liable for any accident or injury that may occur to any child/ren while on a field trip, tour, or other activity which is organized by the Director or any preschool staff as part of the program of the preschool.

12. That I agree to conform to the hours of operation of the centre and will pay an overtime fee if I exceed the known hours of operation. If I am late picking up my child/ren, I agree to pay \$10.00 for the first fifteen minutes or portion thereof, plus \$1.00 per minute thereafter, per child. This amount will be paid to the centre within five days of tardiness. I acknowledge and agree that failure to do so may result in immediate dismissal of child/ren.

13. That I will orient my child/ren to the centre for a minimum of five days prior to his/her full time attendance or at the Director's discretion. I understand and agree that this gradual entry will help my child/ren adjust to the new environment. Late fees also apply to gradual entry hours.

### General \_\_\_\_\_ initial here

14. That I take an active interest in my child/ren's preschool and participate in parent meetings, centre fund-raising events and general work parties when I can.

15. That I complete for the first day of preschool, and keep updated, the following:

- (a) Registration & Health Form
- (b) Emergency/Field Trip Cards
- (c) Child Information Form
- (d) Earthquake Information Kit
- (e) Change of address/phone number, work phone number, doctors, etc.

16. The JCCGV Preschools will be closed for the following days:  
Labour Day – Thanksgiving Day – Remembrance Day – Winter Break -- BC Family Day – Spring Break – Victoria Day, all Jewish High Holidays and 3 Professional Development Days. (Advance notice will be given should there be additional closures).

17. The JCCGV reserves the right to cancel this Agreement at any time when it is determined by the Director to be in the best interests of the child or the centre.

18. Should the Director decide that extra support, other than the teachers in the classroom, is required for the child, the parent(s) will be required to cover the cost. If the parent(s) does not agree to this cost, the parent is then given two weeks to find alternative care.

19. The JCC reserves the right to reduce the days of attendance or terminate this contract because of any recurring physical, emotional, or verbal act which may result in placing your child, other children and their families, or teachers within our centre in an emotional, physical, harmful, hurtful or unsafe situation.

20. The fees as specified shall remain fixed for one fiscal year except under extenuating circumstances.

I hereby acknowledge that I have read, understand, and will abide by this agreement and the parent handbook.

All of which is agreed to, with the intent to be legally bound by the terms herein contained.

Parent's Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Either parent's signature is binding)

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

950 West 41st Avenue, Vancouver, BC Canada V5Z 2N7

Phone: 604.257.5111 Fax: 604.257.5119 Email: info@jccgv.bc.ca Website: www.jccgv.com



## PRESCHOOL REGISTRATION, WITHDRAWAL AND CANCELLATION POLICY FORM 2019-2020

A full JCCGV Family Membership or Single Parent Membership (Complimentary Memberships are not applicable) must be current for Priority Registration and remain current for the full school year in order to receive Members' rates.

All registrants for ECE programs are required, at registration, to make a deposit to secure a space for their child in the program (see below). **This deposit is NON-REFUNDABLE. If the program is full, you will be placed on a waitlist and your deposit will not be processed.**

The deposit will be put towards your final payment, or you can choose to donate it to the Scholarship Fund for all licensed daycares, preschools and after school care programs at the Simkin Family Child Development Centre. A tax receipt will be issued at the end of the program year. Please see application form.

### **SHALOM ALEPH AND SHABBAT SHALOM**

The payment schedule will be as follows:

Upon registering - **\$200** non-refundable deposit for Shalom Aleph; **\$100** non-refundable deposit for Shabbat Shalom; **\$250** non-refundable deposit for both Shalom Aleph and Shabbat Shalom (when registering at the same time).

1 <sup>st</sup> Payment	August 25	1/3 of remaining rate
2 <sup>nd</sup> Payment	September 25	1/3 of remaining rate
3 <sup>rd</sup> Payment	October 25	1/3 of remaining rate minus deposit

### **SHALOM BET**

The payment schedule will be as follows:

Upon registering - **\$250** non-refundable deposit

1 <sup>st</sup> Payment	August 25	1/7 of remaining rate
2 <sup>nd</sup> Payment	September 25	1/7 of remaining rate
3 <sup>rd</sup> Payment	October 25	1/7 of remaining rate
4 <sup>th</sup> Payment	November 25	1/7 of remaining rate
5 <sup>th</sup> Payment	December 25	1/7 of remaining rate
6 <sup>th</sup> Payment	January 25	1/7 of remaining rate
7 <sup>th</sup> Payment	February 25	1/7 of remaining rate minus deposit

If a parent registers two children or more simultaneously for the ECE preschool programs, a 5% discount will be given on lower enrollment fees.

**Payment arrangements must be in place by June 3, 2019. Otherwise, the preschool space and deposit may be forfeited.**



**Late Registration:**

If a parent registers a child after September 1<sup>st</sup>, the payment schedule will be as follows: Upon registering, a \$100/\$200/\$250 deposit is required and your payment schedule will be adjusted accordingly.

**Deposit/Cancellation/Withdrawal Policies:**

The Preschool program runs for 10 months. If you do not complete the school year, the \$250 deposit is **not refundable or transferable** to other programs or persons. In the event that parents wish to withdraw their child from the program, **60 days written or emailed notice is required, by the 1st of any given month. There will be no 'pro-rates'**. Only after receiving the written or emailed notice will the JCCGV refund any remaining funds, which will be calculated from the end of the 60-day notice period. **All funds will be forfeited if withdrawal is after March 1<sup>st</sup> of the current school year.**

**Age requirement:**

Shalom Aleph and Shabbat Shalom - children must be 2 years old by December 31<sup>st</sup> of the school year they are registered for.

Shalom Bet - children must be 3 or 4 years old by December 31<sup>st</sup> of the school year they are registered for.

**General Information:**

Maximum enrollment for Shalom Aleph and Shabbat Shalom programs is 12 children per class. Maximum enrollment for Shalom Bet program is 20 children.

The composition for each class will be taken into consideration and the Director, in this regard, will make the final decision. Some registration situations will be at the Director's discretion.

All children for the 3 and 4 year old program should be toilet trained or in the process of toilet training upon commencement of class.

The JCCGV has the right to cancel programs with insufficient registration.

**YES, I HAVE READ AND UNDERSTAND THE REGISTRATION, WITHDRAWAL AND CANCELLATION POLICY FORM:**

Child's name: \_\_\_\_\_

Parent/Guardian's name: \_\_\_\_\_

Either parent's signature is binding.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For any questions, contact:

Jennifer Trickett

Tel: 604.257.5162

Email: [jtrickett@jccgv.bc.ca](mailto:jtrickett@jccgv.bc.ca)



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**PRESCHOOL PROGRAM APPLICATION FORM:  
Shalom Aleph Preschool for 2 year olds  
2019-2020**

Date: _____
Time: _____
Intake # _____
Staff Init: _____
ID # _____

MEMBER:     YES     NO

CHILD'S LAST NAME: \_\_\_\_\_

CHILD'S FIRST NAME: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_    Currently enrolled in JCC Preschool or Daycare     YES     NO

Other siblings in JCC Preschool or Daycare     YES     NO

**PARENT INFORMATION:** (full name please) For Mailing Purposes

Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ (B): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ (B): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

**Program Time Options:**                       Mon/Wed 9am to 10:30am                       Tues/Thur 9am to 10:30am  
(Rank by priority: 1<sup>st</sup> to 4<sup>th</sup>)                       Mon/Wed 11am to 12:30am                       Tues/Thur 11am to 12:30pm

**METHOD OF PAYMENT**

A non-refundable **\$200.00 deposit** is required for registration in Shalom Aleph. However, for *simultaneous* registration in Shalom Aleph and Shabbat Shalom, the non-refundable **deposit** required is **\$250.00**, instead of \$200.00.

This deposit will be put towards your final payment, or you can mark below to donate it.

I would like to donate my deposit to the Scholarship Fund for all licensed daycares, preschools and after school care programs at the Simkin Family Child Development Centre. A tax receipt will be issued at the end of the program year.

In addition to your first payment, a **\$10.00** fee will be charged for earthquake emergency supplies.

We accept payments by Cheque, Visa, MasterCard or Automatic Withdrawal. **Please choose one of the following:**

Post-dated cheques (as per fee schedule)

Automatic Withdrawal (Void Cheque attached)

I hereby authorize the JCC of Greater Vancouver to debit my account for deposit and monthly program fees.

Signature: \_\_\_\_\_

Visa / MC #: \_\_\_\_\_                      Expiry Date: \_\_\_\_\_

I hereby authorize the JCC of Greater Vancouver to charge my credit card account for deposit and monthly program fees.

Signature: \_\_\_\_\_



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## PRESCHOOL PROGRAM APPLICATION FORM: Shabbat Shalom Friday Preschool for 2 year olds 2019-2020

MEMBER:  YES  NO

CHILD'S LAST NAME: \_\_\_\_\_

CHILD'S FIRST NAME: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Currently enrolled in JCC Preschool or Daycare  YES  NO

Other siblings in JCC Preschool or Daycare  YES  NO

### PARENT INFORMATION: (full name please) For Mailing Purposes

Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ (B): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ (B): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Program Time Options:  Friday 9 am to 10:30 am OR  Friday 11 am to 12:30 pm

Date: _____
Time: _____
Intake # _____
Staff Init: _____
ID # _____

### METHOD OF PAYMENT

A non-refundable **\$100.00 deposit** is required for registration in Shabbat Shalom. However, for *simultaneous* registration in Shalom Aleph and Shabbat Shalom, the non-refundable **deposit** required is **\$250.00**, instead of \$100.00. This deposit will be put towards your final payment, or mark below to donate it.

I would like to donate my deposit to the Scholarship Fund for all licensed daycares, preschools and after school care programs at the Simkin Family Child Development Centre. A tax receipt will be issued at the end of the program year.

In addition to your first payment, a **\$10.00** fee will be charged for earthquake emergency supplies.

We accept payments by Cheque, Visa, MasterCard or Automatic Withdrawal. **Please choose one of the following:**

Post-dated cheques (as per fee schedule)

Automatic Withdrawal (Void Cheque attached)

I hereby authorize the JCC of Greater Vancouver to debit my account for deposit and monthly program fees.

Signature: \_\_\_\_\_

Visa / MC #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

I hereby authorize the JCC of Greater Vancouver to charge my credit card account for deposit and monthly program fees.

Signature: \_\_\_\_\_



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## PRESCHOOL PROGRAM APPLICATION FORM: Shalom Bet Preschool for 3 and 4 year olds 2019-2020

**Program Time:** Monday to Friday, 8:45am to 12:30pm

**MEMBER:**     YES     NO

**CHILD'S LAST NAME:** \_\_\_\_\_

**CHILD'S FIRST NAME:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Postal Code:** \_\_\_\_\_    **Currently enrolled in JCC Preschool or Daycare**     YES     NO

**Other siblings in JCC Preschool or Daycare**     YES     NO

### PARENT INFORMATION: (full name please) For Mailing Purposes

**Name:** \_\_\_\_\_ **Phone (H):** \_\_\_\_\_ **(B):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone (H):** \_\_\_\_\_ **(B):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

A non-refundable **\$250.00 deposit** is required at registration. This deposit will be put towards your final payment, or mark below to donate it.

I would like to donate my deposit to the Scholarship Fund for all licensed daycares, preschools and after school care programs at the Simkin Family Child Development Centre. A tax receipt will be issued at the end of the program year.

In addition to your first payment, a **\$40.00** fee will be charged for earthquake emergency supplies and snacks.

We accept payments by Cheque, Visa, MasterCard or Automatic Withdrawal. **Please choose one of the following:**

Post-dated cheques (as per fee schedule)

Automatic Withdrawal (Void Cheque attached)

I hereby authorize the JCC of Greater Vancouver to debit my account for deposit and monthly program fees.

Signature: \_\_\_\_\_

Visa / MC #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

I hereby authorize the JCC of Greater Vancouver to charge my credit card account for deposit and monthly program fees.

Signature: \_\_\_\_\_



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