



Club J Out of School Care Registration Forms and General Information

for RETURNING children

2025-2026 School Year

Contact info:
Denise Scharen
Club J Program Coordinator
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clubj@jccgv.bc.ca



Karen and Gary Simkin Family

Child Development Centre

Jewish Community Centre of Greater Vancouver



Out of School Care

2025 - 2026 School Year Priority Registration Information

Jewish Community Centre of Greater Vancouver
950 West 41st Avenue, Vancouver, BC, V5Z 2N7
Tel: 604.257.5111 ext. 404 Fax: 604.257.5119

The following categories of registration will be accepted during the indicated period:

1st Priority (families currently enrolled)

March 3 & 4, 2025

Registration is open for families whose children are currently enrolled in a JCC ECE Licensed Program (Shalom Preschools, Daycares, or Out of School Care) for the 2024-2025 school year.

2nd Priority (members)

March 5 & 6, 2025

Registration is open for **JCC members** whose children are not currently attending JCC ECE Licensed Programs.

Open Registration

March 7, 2025 - onward

Confirmation: You will receive confirmation of acceptance by April 30 by email. If the program is full, you will be notified and placed on the wait list. In this case, your deposit will not be processed.





Dear Families:

Club J Out of School Care registration for the 2025-2026 school year begins in March 2025 (please check the priority information page for your exact date).

Attached you will find forms required for 2025-2026 registration. Please submit all forms:

1. Registration Form
2. Withdrawal/Cancellation Form
3. Parent Agreement
4. Emergency Consent Form
5. Email, Fieldtrip and Photography Consent Form
6. **Photograph of your Child (Registration will not be accepted without a recent photo. Digital or physical copies are acceptable)**

Application forms should be scanned and emailed to clubj@jccgv.bc.ca. If you are unable to send electronically, they can be dropped off at the JCC only **after** 8:00am during the days of your specific registration category. **All forms must be completed in order for us to process your registration. Please submit original documents or photocopies. No photographs of forms can be accepted.**

Should you have any questions, please contact me at 604.257.5111 ext. 404 or clubj@jccgv.bc.ca.

Sincerely,

Denise Scharen
Club J Program Coordinator



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Out of School Care Fees

2025-2026 School Year

Monthly fees – L'Ecole Bilingue

Days per week	JCC Member	Non-Member
5 days/week	521.50	639.00
4 days/week	437.50	542.50
3 days/week	348.50	421.00
2 days/week	249.00	303.00

Monthly fees – Vancouver Talmud Torah

Days per week	JCC Member	Non-Member
5 days/week	479.50	588.00
4 days/week	405.50	493.50
3 days/week	323.00	391.50
2 days/week	232.00	276.50

School Bus Transportation surcharge – VTT and LEB

Days per week	Monthly charge
5 days/week	60.00
4 days/week	48.00
3 days/week	36.75
2 days/week	24.50

Bus surcharge is subject to 5% GST

Bus fees are subject to change with 30 days notice

Monthly fees – Richmond Jewish Day School*/ VHA and Drop-off

Days per week	JCC Member	Non-Member
5 days/week	440.50	538.00
4 days/week	371.50	453.50
3 days/week	297.00	361.00
2 days/week	213.00	254.00

* Daily school bus transportation to the JCC must be arranged through Richmond Jewish Day School

Children must be enrolled for a minimum of 2 days/week.

Fees:

- include extended care on early dismissal days.
- are processed monthly beginning August 25 through May 25.
- as listed do not include [Child Care Fee Reduction Initiative](#) discount.

Provincial subsidy applications are available through this link: [Affordable Child Care Benefit](#).

Emergency supply fee of \$33.00 will be added to first payment.



OUT OF SCHOOL CARE CLOSURES 2025 – 2026

SEPTEMBER		
MON 1	Labour Day stat	OSC CLOSED
TUE 2	VSB Schools – First day of School	
TBD	VTT/RJDS/VHA-First day of School	
TUE 23	Rosh HaShana	OSC CLOSED
WED 24	Rosh HaShana	OSC CLOSED
TUE 30	National Day for Truth and Reconciliation	OSC CLOSED
OCTOBER		
THU 2	Yom Kippur	OSC CLOSED
TUE 7	Sukkot	OSC CLOSED
WED 8	Sukkot	OSC CLOSED
MON 13	Thanksgiving stat	OSC CLOSED
TUE 14	Shemini Atzeret	OSC CLOSED
WED 15	Simchat Torah	OSC CLOSED
NOVEMBER		
TUE 11	Remembrance Day stat	OSC CLOSED
DECEMBER		
DEC 22 – JAN 2	WINTER BREAK (all schools)	OSC CLOSED
JANUARY		
MON 6	Club J resumes after WINTER BREAK	
FEBRUARY		
MON 16	BC Family Day stat	OSC CLOSED
MARCH		
MAR 16-27	SPRING BREAK for VSB schools <i>OSC as usual for VTT/RJDS/VHA students</i>	
MAR 30–31	PASSOVER BREAK for VTT, VHA and RJDS <i>OSC as usual for VSB students</i>	
APRIL		
APR 1-10	PASSOVER BREAK for VTT, VHA and RJDS <i>OSC as usual for VSB students except on Passover closures</i>	
THU 2	Passover	OSC CLOSED
FRI 3	Passover/ Good Friday stat	OSC CLOSED
MON 6	Easter Monday OSC CLOSED	OSC CLOSED
WED 8	Passover	OSC CLOSED
THU 9	Passover	OSC CLOSED
MAY		
MON 18	Victoria Day stat	OSC CLOSED
FRI 22	Shavuot	OSC CLOSED
JUNE		
TBD	Last day of OSC for VTT, RJDS, VHA	
THU 25	Last day of OSC for VSB schools	

CLUB J OUT OF SCHOOL CARE 2025-2026 REGISTRATION FORM

(Must be submitted with signed policy form)

(For office use only)

Date: _____

Rec. #: _____

Staff Init: _____

ID # _____

JCCGV MEMBER: YES NO

CHILD'S LAST NAME: _____

CHILD'S FIRST NAME: _____

Date of Birth (mm/dd/yy): _____

Address: _____ City: _____

Postal Code: _____ School Attending in September: _____ Grade _____

Other siblings in JCC Preschool or Daycare YES NO

PARENT INFORMATION: (full name please) for mailing purposes

Name: _____ Phone (H): _____ (W): _____

Address: _____ City: _____ Postal Code: _____

Email: _____ Cell #: _____

Name: _____ Phone (H): _____ (W): _____

Address: _____ City: _____ Postal Code: _____

Email: _____ Cell #: _____

Options: Full-time (Monday to Friday)
Part-time (minimum 2 days/week): Monday Tuesday Wednesday Thursday Friday

Club J L'Ecole Bilingue Vancouver Talmud Torah RJDS VHA/drop-off

METHOD OF PAYMENT - Please choose one of the following:

⇒ A non-refundable **\$250.00 deposit** is required at registration (VISA, MC or Cheque).

⇒ **In addition to your first payment, an annual \$33.00 fee will be charged for emergency supplies.**

⇒ We accept payments by Cheque, Visa, MasterCard, or Automatic Withdrawal

Post-dated cheques (September to June inclusive)

Automatic Withdrawal (Void Cheque attached)

I hereby authorize the JCC of Greater Vancouver to debit my account for 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: _____

Confirmation: You will receive confirmation of acceptance by April 30 by email. If the program is full, you will be notified and placed on the wait list. In this case, your deposit will not be processed.

Please attach
child's photo
to this form.

CHILD CARE

EMERGENCY CONSENT FORM

CCFL3, Rev 04-2009

CHILD'S NAME: _____ BIRTHDATE: _____

ADDRESS: _____

PARENT'S NAME: _____ HOME PHONE: _____

CELL PHONE: _____ WORK PHONE: _____

PARENT'S NAME: _____ HOME PHONE: _____

CELL PHONE: _____ WORK PHONE: _____

EMERGENCY CONTACT: _____ CELL PHONE: _____ PHONE: _____

OUT OF TOWN CONTACT: _____ PHONE: _____

CHILD'S DOCTOR: _____ PHONE: _____

DATE OF MOST RECENT TETANUS SHOT: _____

ALLERGIES / MEDICATIONS: _____

CHILD'S DENTIST: _____ PHONE: _____

CARE CARD NUMBER _____

CONSENT

- 1) It is the policy of this facility to notify a parent when a child is ill or needs medical attention. Occasionally we cannot contact parents and we need to get immediate help for the child. Our procedure is to call for an ambulance.
- 2) Please sign the consent below so that we can take the appropriate action on behalf of your child. Return the signed consent to the facility immediately. We will take this consent with us to the emergency centre.
- 3) I hereby give consent for my child _____ to be taken to the nearest emergency centre when I cannot be contacted.
- 4) I hereby give consent for my child named above to receive medical treatment.

DATE

SIGNATURE OF PARENT / GUARDIAN

WITNESS

CCFL3, Rev 04-2009

Provided by VCH – Community Care Facilities Licensing



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FIELD TRIP CONSENT

I give my permission for _____ to go on all field trips taking place while my child is registered in the program. I realize that staff are not liable for any losses, injuries or accidents that may occur while on the trips.

Signature: _____ Date: _____

PERMISSION TO PHOTOGRAPH

I give my permission for my child to be photographed in the JCC Child Development Centre programs at the discretion of staff. The photos may be used for (please check all that apply):

☐ Educational Purposes

☐ Class Projects

JCC Publicity: Print Social Media

Child's Name: _____ Program: _____

Signature: _____ Date: _____

EMAIL DISTRIBUTION CONSENT

I give my permission for my email to be distributed to the parents of the other children in my child(ren)'s class.

Signature: _____ Date: _____

ABSENCE NOTIFICATION

The program coordinator must be notified by email or phone if your child will not be picked up by Club J from their school. Some examples: 1) your child is absent from school and will not be picked up or attend Club J, 2) your child has an appointment and you will be bringing them directly to Club J, 3) a last-minute emergency or playdate happens and your child will be picked up from school by you or someone else. Please notify us as soon as you are able, but the latest by 300pm on a regular school day or dismissal time on an early dismissal day. Each family will be allotted three "free". Should you fail to notify us more than three times there will be a \$25.00 penalty charged each time.

Signature: _____ Date: _____



Jewish Community Centre of Greater Vancouver

Harry & Jeanette Weinberg Jewish Community Campus

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JCC CLUB J OUT OF SCHOOL CARE

PARENT AGREEMENT

2025-2026 School Year

The following conditions apply and are agreed to with respect to the Club J Out of School Care program at the Jewish Community Centre of Greater Vancouver (JCCGV, JCC, and centre). As a parent of a child or children that is/are enrolled in the Club J program, I accept and agree to the following:

Initial:

A. Financial

1. That my child/ren's fee shall be paid:
 - i) By the 1st of each and every month if paying with post-dated cheques. Post-dated cheques must be up to and including the end of June, which is the end of the program year.
 - ii) On or before the 25th of the month prior if payment is made by VISA, MasterCard or automatic withdrawal.
 - iii) If this is not possible, a written note of explanation will be submitted to the Early Childhood Education Director, or a late payment fee of \$15.00 per month will be levied.
2. That failure to pay fees by the 1st or 25th of the month respective of payment method may result in notice by the JCC of withdrawal of Club J 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. That **two calendar month's notice in writing will be given** or emailed to the Program Coordinator, by the first of the month of my intent to withdraw my child/ren or reduce the number of days enrolled. I agree that I will be responsible for two full month's fees in lieu of such notice. Refunds will not be made.
4. That a full month's fees must be paid for any month or part thereof when my child/ren is/are away from the centre for illness or vacation. I understand that a full month's fee reserves my child/ren's Club J space.
5. Program fees include an afternoon snack and care during early dismissal days (that are part of the regular school schedule).
6. Official receipts for fees will be given upon request.
7. That my child must be enrolled for a minimum of 2 days per week.

Initial:

B. Health

1. That I have read the "Health Policies & Procedures" in the Parent Handbook and agree to follow the stated rules.
2. That I update all health and emergency records for my child.
3. 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.
4. 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.

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CORE VALUES: COMMUNITY • RESPONSIBILITY • EXCELLENCE

950 West 41st Ave. Vancouver, BC Canada V5Z 2N7

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

C. Safety and Well-Being of the Child

Initial: _____

1. That I list below ALL persons NOT LEGALLY permitted to pick up my child.

NAME	AGE	RELATIONSHIP
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Copy of Supreme Court Order provided? Yes _____ No _____

2. That I will sign my child/ren out each day. I will notify Club J staff if someone other than those authorized by me is authorized to pick up my child/ren.
3. 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 Club J staff as part of the program of Club J.
4. 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. I agree to pay \$20.00 for the first fifteen minutes or portion thereof, plus \$1.00 per minute thereafter, per child if I am late picking up my child/ren. 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 my child/ren.
5. 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 staff within our program in an emotional, physical, harmful, hurtful or unsafe situation.

D. General

Initial: _____

1. That I take an active interest in my child/ren's program.
2. That I complete, and keep updated, the following:
- (i) Registration & Health Forms
 - (ii) Emergency Cards
 - (iii) Immunization Form
 - (iv) Change of contact information (phone numbers, address, doctor's phone number, etc)
3. **The JCCGV Club J program will be closed for the following days: Thanksgiving Day, Remembrance Day, Family Day, Good Friday, Easter Monday, Victoria Day, National Day for Truth and Reconciliation and all Jewish High Holidays (Rosh Hashanah, Yom Kippur, Sukkot, Shmini Atzeret, Simchat Torah, Passover and Shavuot).** Since the program fees are based on a yearly average rate, the monthly fee for the program remains consistent from September to June.
4. The program runs for 10 months and fees do not include school Professional Days, school closures due to Winter Break, Spring Break, or Passover Break. Please refer to the JCC brochure for additional care for Pro-D Days and Camps.
5. 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/ren or the centre.
6. The fees as specified shall remain fixed for one fiscal year (Sept. 1 – Aug. 31) except under extenuating circumstances. Notice of such fee changes shall be issued at least thirty days prior to the renewal date.
7. If your child is attending Richmond Jewish Day School, bus transportation must be arranged through RJDS.

I hereby acknowledge that I have read and understand and will abide by this agreement and the Parent Handbook.

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

Parent Name

Child's Name

Parent Signature

Date:

Program Coordinator Signature

Date:

** Please note – fees are subject to change at the beginning of the JCC fiscal year (September of each year)



Jewish Community Centre
of Greater Vancouver

CLUB J OUT OF SCHOOL CHILDCARE REGISTRATION, WITHDRAWAL & CANCELLATION POLICY FORM 2025-2026 SCHOOL YEAR

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

All registrants for the Club J Out of School Care programs are required, at registration, to make a deposit of \$250 to secure a space for their child in the program. **This deposit is NON-REFUNDABLE.**

Children must be registered for a minimum of 2 days per week.

Out of School Care fees are based on a yearly average rate, the monthly fee for the program remains consistent from September to June.

Credit card payments are charged on the 25th of each month, August through May. Cheque payments require 10 post-dated cheques for the 1st of each month, September through June. EFT payments require a void cheque, allowing automatic withdrawal on the 25th of each month, August through May.

Payment arrangements must be in place by **June 15**. Otherwise the deposit and child's space in Club J may be forfeited.

Confirmation: The Program Coordinator will finalize confirmation by the end of April in the current school year by email. If there is no space available for your child, you will be notified and placed on the Wait List. In this case, your deposit will not be processed until you are accepted into the program.

Transportation: We currently provide pick-up for children attending L'Ecole Bilingue and Vancouver Talmud Torah.

Bus transportation **must** be arranged directly through Richmond Jewish Day School for children arriving from that school.

Deposit/Cancellation/Withdrawal Policies: The Out of School Care 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, **two months written notice is required, by the 1st of any given month. There will be no 'pro-rates'.**

**The JCCGV has the right to cancel any programs with insufficient registration.
All registration is at the Early Childhood Education Director's discretion.**

YES, I HAVE READ AND UNDERSTAND ALL OF THE ABOVE:

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____ Date: _____

This form must be signed and included with your application form.

For any questions, contact:

Denise Scharen
Club J Out of School Care Program Coordinator
Tel: 604-257-5111 ext. 404
Email: clubj@jccgv.bc.ca