



January 2026

Dear Families:

Registration for Shalom Aleph Preschool for 2 year olds for the school year 2026-2027 begins on Monday, January 26, 2026.

In this package you will find:

- Application form
- Withdrawal and Cancellation Policy Form
- Parent Agreement
- JCC Waiver

Priority Registration Information is available on the JCC website.

February 23, 2026: This week, you will receive confirmation of acceptance in the program or you will be notified of your status on the waitlist. Please inform us of any contact information changes.

June 8, 2026: Your payment plan must be in place. Payments will begin on August 25.

July 13, 2026: This week, an Information Package will be emailed to you with required forms to be completed.

August 25, 2026: First fee installment and emergency supply fee payments are due.

Completed forms should be scanned and emailed to eceregistration@jccgv.bc.ca. If you are unable to send electronically, they can be dropped off at the JCC beginning Monday, January 26, 2026, **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 email me at 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

PRESCHOOL PROGRAM APPLICATION FORM: Shalom Aleph Preschool for 2-year olds 2026-2027

Program Time: Tuesdays, Thursdays and Fridays, 9:00am to 12:00pm

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 #: _____

METHOD OF PAYMENT

A deposit equal to one full month's fee is required to secure a space in any child care program. With proper notice, this deposit will be applied to your final month of care, 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 out of 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 **\$25.00** fee will be charged for earthquake emergency supplies.

For payment processing, please make sure to have an Xplor account setup with your child listed as a family member.

Signature: _____

For office use only

Date: _____

Time: _____

Intake # _____

Staff Init: _____

ID # _____



Jewish Community Centre of Greater Vancouver

950 West 41st Avenue, Vancouver BC | 604.257.5111 | www.jccgv.com



Karen and Gary Simkin Family

Child Development Centre

Jewish Community Centre of Greater Vancouver

PRESCHOOL REGISTRATION and WITHDRAWAL & CANCELLATION POLICY 2026-2027

Registration:

A deposit equal to one full month's fee is required to secure a space in any child care program.

Payment Schedule:

Child care fees are paid monthly. Your credit card or EFT will be charged on the 25th of each month. The first payment will be charged in the month before your child's first day of care.

Withdrawal and Cancellation Policy:

If you cancel prior to your child's start date, or if you do not complete the school year, the deposit is non-refundable and cannot be transferred to another program (exception for children transferring programs within licensed child care) or person. If you choose to withdraw your child from any of our licensed child care programs after your child's start date, two full months' written notice (by email to the Director) is required. Notice must be given by the 1st day of a month. The deposit will be applied to your child's last month of care if proper notice is given. Fees are not prorated. Example: If notice is given on March 1, the last day of care will be April 30. Alternatively, you can choose to donate the deposit to the Scholarship Fund for all licensed child 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.

Age requirement:

Children must be 2 years old by December 31 of the school year they are registered for.

Some registration decisions will be made at the Director's discretion.

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

YES, I HAVE READ AND UNDERSTAND THE REGISTRATION and WITHDRAWAL & CANCELLATION POLICY:

Child's name: _____

Parent/Guardian's name: _____

Signature: _____ Date: _____

For any questions, contact:

Jennifer Trickett

Tel: 604.257.5162

Email: jtrickett@jccgv.bc.ca



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Jewish Community Centre of Greater Vancouver

Harry & Jeanette Weinberg Jewish Community Campus

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JCCGV CHILD CARE AGREEMENT 2026-2027

The following conditions apply and are agreed with respect to Shalom Aleph 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:

1. That my child/ren's child care fee will be withdrawn on the 25th of the month prior to the 1st of each month by scheduled monthly credit card or EFT payments. If this is not possible, a written note of explanation will be submitted to the Director, (the "Director"), or a late payment fee of \$15.00 per month will be levied.
2. That failure to pay child care fees by the 25th of the month, respective of payment method, may result in notice by the JCC of withdrawal of child care 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 if you choose to withdraw your child from any of our licensed child care programs after your child's start date, two full months' written notice (by email to the Director) is required. Notice must be given by the 1st day of a month. The deposit will be applied to your child's last month of care if proper notice is given. Fees are not prorated.
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. That official receipts for child care fees will be available at the end of February.

A. Financial initial here

6. That I have read the Health section in the family 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.

B. Health 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
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Copy of Supreme Court Order provided? Yes No

12. That 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 child care staff as part of the program of the child care.
13. 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, that I am late picking up my child/ren. This amount will be paid within five days of tardiness. I acknowledge and agree that failure to do so may result in immediate dismissal of child/ren.
14. 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 will apply if gradual entry hours are not adhered to.**

C. Safety and Well Being of the Child initial here

CORE VALUES: COMMUNITY • RESPONSIBILITY • EXCELLENCE

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

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15. That I take an active interest in my child/ren's child care and participate in parent meetings, centre fund-raising events and, general work parties.
16. That I complete for the first day of preschool, and keep updated, the following:
 - (i) Registration Form
 - (ii) Immunization Form
 - (iii) Emergency Consent Cards
 - (iv) Child Information Form
 - (v) Change of address, phone numbers, work numbers, doctors, etc.
17. The JCCGV child care programs will be closed for the following days: **Fees remain the same**. Labour Day, Thanksgiving Day, Truth and Reconciliation Day, Remembrance Day, Winter Break, BC, Family Day, Passover Break, Victoria Day, Rosh Hashanah, Yom Kippur, Sukkot, Shemini Atzeret, Simchat Torah, Passover, Shavuot, and up to six Professional Development Days. (Advance notice will be given should there be additional closing days).
18. 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.
19. 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.
20. 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.
21. That the fees as specified shall remain fixed for one fiscal year (Sept. 1 – Aug. 31), except under extenuating circumstances.

D. General initial here

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

All of which is agreed to, with 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:

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Jewish Community Centre of Greater Vancouver

RELEASE OF LIABILITY, WAIVER OF CLAIMS, CONSENT FORM AND INDEMNITY AGREEMENT (the “AGREEMENT”)

I, _____, on my own behalf, and for and on behalf of _____

(the “Applicant(s)”), for whom I am the parent and/or legal guardian, **DO HEREBY
AGREE AS FOLLOWS:**

A. VOLUNTARY ASSUMPTION OF RISK

1. Activities, Programs, and Facilities

I, and the Applicant(s) if any (collectively, “We” or “Us”), am/are aware that as a member or guest of the Jewish Community Centre of Greater Vancouver (the “JCCGV”), and/or as a participant in any programs, lessons, daycare, childcare or activities offered by or through the JCCGV (the “JCCGV Programs and Activities”) I (We) will be given access to the JCCGV premises and facilities (the “JCCGV Facilities”), including equipment of the JCCGV used in connection with JCCGV Programs and Activities.

I (We) understand that participation in aquatics, sports, dance, fitness training, strength and weight training, aerobic exercise, daycare, childcare, and/or any other recreational, cultural, social or other form of activity can result in physical injuries, and/or aggravation of pre-existing health conditions, injuries or congenital defects. I (We) acknowledge that prior to participation in any JCCGV Programs and Activities, I (We) should seek medical approval if I (We) know or suspect that such participation may pose a risk to me (Us), or if I (We) have any concern about my or the Applicant(s)’ fitness or suitability for such activities. I (We) represent and warrant that I (We) are in good health and physical condition, or have been approved by a medical practitioner to participate fully in the JCCGV Programs and Activities, and I (We) accept full and complete responsibility for my and the Applicant(s)’ ability to healthfully participate in all JCCGV Programs and Activities.

I (We) understand that JCCGV staff does not assume responsibility for supervising children under 12 years of age when not attending a registered program. I (We) agree

that the JCCGV is not responsible for children left unattended before programs start or after they have finished.

I (We) further understand that at the JCCGV Facilities, and while participating in any JCCGV Programs and Activities, other children, adults, staff, volunteers, personal trainers, program instructors and assistants will be interacting with each other and utilizing common areas, facilities and equipment, and that there are many risks, dangers and hazards arising from such use and interaction. I (We) further understand that some JCCGV Programs and Activities will take place at locations other than at the JCCGV Facilities, and that there are many risks, dangers and hazards arising from transportation to and from the JCCGV Facilities to such program locations and while at such program locations. Such risks, dangers and hazards include but are not limited to: inadequate coaching, instruction or supervision; inadequate safety precautions, cleaning, maintenance, warnings, or equipment; negligence on the part of the JCCGV or any of its directors, officers, staff, program instructors, assistants or volunteers; negligence of other participants or spectators; being struck by objects or other participants; collisions with objects, persons, or vehicles, including while on public transportation or any transportation provided by the JCCGV; adverse reaction from exposure to allergens; exposure to illnesses, viruses, or disease; loss of balance, slips and falls; drowning, shock, burns, sunburns, food borne illness, or dehydration; fractures, sprains, strains, paralysis, soft tissue injury, spinal cord injury, psychological injury, head, neck or brain injury, and other bodily injury.

I (We) understand and freely assume all such risks, both known and unknown, including but not limited to accidental death or serious disability, arising from my and/or the Applicant(s)' attendance at and use of the JCCGV Facilities, and participation in all JCCGV Programs and Activities, including but not limited to all lessons, programs or courses I (We) register to participate in.

2. COVID-19 Worldwide Pandemic

I am (We are) aware that there is a worldwide pandemic arising from the Covid-19 virus (the "Virus"). I am (We are) aware that the Virus is transmitted via liquid droplets when a person coughs or sneezes. The Virus can enter through these droplets through the eyes, nose or throat if you are in close contact with an infected person, and can be spread by touch if a person has used their hands to cover their mouth or nose when they cough.

I (We) understand that by accessing the JCCGV Facilities and participating in JCCGV Programs and Activities there is a risk that the Virus may be transmitted to me (Us).

I (We) also understand that information regarding the Virus is new and developing, and protocols and recommendations for best practices to reduce the spread of infection of the virus may be changed as information develops on an ongoing basis.

3. Voluntary Assumption of Risk – CONSENT and AGREEMENT

By entering into the JCCGV Facilities and/or participating in and/or registering for JCCGV Programs and Activities, I (We) hereby acknowledge and agree that I (We) do so at my or our own risk, and that I (We) **DO HEREBY CONSENT TO, FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE AND LOSS RESULTING THEREFROM.**

B. MEDICAL TREATMENT AND PRIVACY CONSENT FORM

4. Consent to Medical Treatment

I (We) hereby agree that by executing this AGREEMENT, I (We) give the JCCGV staff permission in the event of an emergency, to act on my behalf and/or on behalf of the Applicant(s) as the case may be, and for the physician in attendance to hospitalize and secure proper treatment that may be needed for me and/or the Applicant(s).

5. Consent to Collection and Use of Personal Information

I (We) understand that in order to become a member, employee, or guest of the JCCGV, and/or to participate in JCCGV Programs and Activities, the JCCGV may collect and store personal information about me (Us). Personal information collected by the JCCGV includes but is not limited to biographical information, financial information, contact information, medical information, personal health information including temperature or other vital statistics, likes and preferences, comments and feedback provided, and photographs or videos.

I (We) hereby authorize the JCCGV to collect such information and to use it to manage its membership and program database, to run and assess its programs and services, for membership cards and controlling access to the JCCGV Facilities, to communicate with me (Us), for fundraising and marketing purposes, to respond to public health emergencies, to provide emergency care to me (Us), for employment or volunteer opportunities, and for any other use in accordance with its Privacy Policy, as may be amended from time to time, or as may be required by law. The JCCGV's Privacy Policy is available for viewing on its website <https://www.jccgv.com>.

I (We) understand that photos or videos may be taken of me (Us), and I (We) hereby consent to such photos or videos being taken and used for marketing, advertising and promotional purposes for the JCCGV and/or for JCCGV Programs and Activities.

C. RELEASE AND WAIVER OF LIABILITY and INDEMNITY

TO THE JCCGV and all of its board members, employees, staff, independent contractors, program instructors, volunteers, agents, successors and assigns, executors, heirs and representatives (collectively, the "RELEASEES"):

In consideration for being provided access to the JCCGV Facilities and/or being permitted to participate in JCCGV Programs and Activities, and for other good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, **I (WE) DO HEREBY AGREE AS FOLLOWS:**

- A. TO WAIVE ANY AND ALL CLAIMS** that I (We) have or may have in the future against the RELEASEES OR ANY OF THEM, and **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, expense or injury including death that I (We) may suffer, or that my or the Applicant(s)' next of kin may suffer, resulting from my and/or the Applicant(s)' attendance at or use of the JCCGV Facilities or equipment and/or participation in any JCCGV Programs and Activities, **DUE TO ANY CAUSE WHATSOEVER INCLUDING NEGLIGENCE, BREACH OF CONTRACT, BREACH OF STATUTORY DUTY, AND ANY FAILURE ON THE PART OF THE RELEASEES OR ANY OF THEM TO SAFEGUARD ME FROM THE RISKS, DANGERS AND HAZARDS REFERRED TO ABOVE;**
- B. TO INDEMNIFY AND HOLD HARMLESS** the RELEASEES and each of them from any and all liability for any damage to property or personal injury to any third party, resulting from my or the Applicant(s)' participation, observation, attendance at, involvement in or in any way connected to the JCCGV Facilities and/or JCCGV Programs and Activities.
- C. AS PARENT or LEGAL GUARDIAN WITH LEGAL RESPONSIBILITY FOR THE APPLICANT(S), I CONSENT AND AGREE TO THE APPLICANT(S)' RELEASE OF ALL THE RELEASEES**, and for myself, my heirs, assigns and next of kin, **I RELEASE AND AGREE TO INDEMNIFY THE RELEASEES** from any and all liabilities in any way connected to or arising out of the Applicant(s)' attendance at the JCCGV Facilities and/or participation in any JCCGV Programs and Activities.

Initial Here:

D. This AGREEMENT shall be binding upon me (Us) and our heirs, next of kin, executors, administrators, assignees, personal representatives, and guardians, in the event of my or the Applicant(s)' death or incapacitation.

E. This AGREEMENT shall be governed by and interpreted solely in accordance with the laws of the province of British Columbia, and the laws of Canada applicable therein.

F. I (We) am/are not relying on any oral or written representations or statements made by the Releasees with respect to the safety of the JCCGV Facilities or JCCGV Programs and Activities, other than what is set forth herein.

G. I (We) confirm that I (We) have read and understand this AGREEMENT prior to signing it, and I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS which me or my heirs, next of kin, executors, administrators, assigns and representatives may have against the RELEASEES, and I AM WAIVING CERTAIN LEGAL RIGHTS OF THE APPLICANT(S).

**BY SIGNING THIS AGREEMENT YOU WILL WAIVE LEGAL RIGHTS INCLUDING
THE RIGHT TO SUE**

PLEASE READ CAREFULLY BEFORE SIGNING

Date:_____

SIGNATORY:

Name:_____
(Please print)

Signature:_____

WITNESS:

Name:_____
(Please print)

Signature_____

APPLICANT(S):

Name:_____
(Please print)

Name:_____
(Please print)

Signature:_____
(if applicant is 16-18 years old)

Name:_____
(Please print)

Name:_____
(Please print)

Signature:_____
(if applicant is 16-18 years old)