

amounts: the maximum amount determined in accordance with the regulations of the Minister, and an amount representing not more than 1/10 of the total price agreed upon for the services.

73. If the client cancels the contract after the provision of services has begun, the institution may demand only the following amounts from the client:

1) The price of the services provided calculated in months, lessons, or credits as specified in the contract;

2) as penalty, the amount obtained by subtracting the admission or enrolment fees from the lesser of the following two amounts: the maximum amount determined in accordance with the regulations of the Minister, and an amount representing not more than 1/10 of the total price agreed upon for the services.

74. In the ten days following the cancellation of the contract, the institution must return to the client the amounts it has received in excess of those to which it is entitled.

75. The client may demand that the contract be annulled if he becomes aware that the student was admitted to the educational services concerned in contravention of the provisions governing admission to those services.

76. No person may depart from the provisions of this chapter by means of an agreement which provides otherwise.

Furthermore, no client may waive a right conferred on him by this chapter.

Medical authorizations:

The parent that cannot be reached to give his consent authorizes the establishment, in the case of an illness or accident regarding the student, to provide the student with adequate treatment.

The parent commits to, in the case of an allergy to the student, respect the protocol of dealing with allergies established by the establishment.

The parent commits to, in the case of a chronic illness, provide the establishment with an emergency medical intervention plan, signed by a doctor.

The parent commits to inform the establishment of an allergy or chronic illness that may happen during the school year.

The parent authorizes the student to participate in all educational outings anticipated as part of the educational services.

The establishment commits to not deed, transfer, or sell this contract.

Accepted and signed in _____ (city), the _____ (date).

Parents Signature: _____

Establishment Signature: _____



BIALIK HIGH SCHOOL

**Application Package
2012-2013**

**Educational Services Contract
for the 2012-2013 School Year**

BETWEEN: Jewish People's Schools and Peretz School Inc. (hereafter indicated as "establishment"), a corporation duly constituted, holding a private school permit issued by virtue of the Loi sur l'enseignement privé, and having its main office at 6502 Kildare, Cote St. Luc, Qc, H4W 3B6.

AND: Name of parent or guardian _____
(hereafter indicated as "parent") responsible as parental authority for Name of student _____ (hereafter indicated as "student")
residing at complete Address _____

Conditions

The establishment commits to offer educational services at the preschool, elementary, or secondary level in English pursuant to the *Programme de formation de l'école québécoise* as set by the Ministère de l'Éducation, du Loisir et du Sport. The language of instruction is English. The school year begins on August 27, 2012, and ends on June 21, 2013.

The establishment commits to offer to the student, at the request of the parent, Jewish studies, which form an integral part of its educational program.

The establishment commits to provide the parent a copy of this contract prior to the beginning of the school year. It also commits to provide the parent, at the beginning of the school year, a copy of the regulations of the school (which can be found in the annual handbook at the Elementary and in the student's agenda at the Secondary), the activities calendar, the name of the student's teacher if the student is in preschool, or in the other cases, the names of all of the student's teachers as well as the name of his responsible person, if applicable.

The parent commits to pay to the establishment the fees for this contract by respecting the payment schedule in the Information on School Fees Package. He also commits to take notice of this contract and to ensure that the student respects the general rules of the establishment.

The parent commits to collaborate with fundraising and to participate with the volunteering activities organized by the establishment.

The parent is liable to follow the recommendations of the establishment in providing pedagogical or psychological support for the student, particularly in facilitating the integration of a student coming from another school.

The establishment may refuse admission or re-admission to a student who does not respect, or whose parent does not respect, the rules and regulations outlined in the contract. It may also refuse the re-admission of a student who no longer fulfils the eligibility criteria.



Financial Terms:

Compulsory fees:

| | |
|--|----------------|
| Registration fees | \$ 200 |
| Tuition fees | \$2,000 |
| Contribution to the building fund (Based on a total contribution per family of \$1,800) | \$ 360 |
| TOTAL | \$2,560 |

Jewish studies:

Registration to Jewish studies

| | |
|---|---|
|  <div style="text-align: center;"> <p>בתי ספר עממיים יהודיים ובתי ספר על שם פרץ LES ECOLES JUIVES POPULAIRES ET LES ECOLES PERETZ JEWISH PEOPLE'S SCHOOLS & PERETZ SCHOOLS INC. ידישע פאלקס שולן און פרץ שולן EXECUTIVE OFFICE: 6502 Kildare Road, Cote Saint-Luc QC H4W 3B8 • Tel.: 514-731-3841 Fax: 514-731-0343</p> </div>  | |
| APPLICATION FOR ADMISSION | |
| Please print clearly. | |
| Date of application: _____ For academic year: _____ | |
| <input type="checkbox"/> JPPS Tel.: 514-731-6456 Applying to: <input type="checkbox"/> SEE | <input type="checkbox"/> Bialik High School Tel.: 514-481-2736 Applying to: <input type="checkbox"/> SEE |
| Bialik High School applicants only: | |
| Applying to: | Hebraica Track <input type="checkbox"/> Y <input type="checkbox"/> N Section Française <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Academic Support Program |
| FAMILY INFORMATION | |
| Family name: _____ Father's name: _____ Mother's name: _____ Mother's maiden name: _____ Address: _____ _____ Postal code: _____ Home tel(s): _____ Parent's title: _____ Marital status: _____ <small>(Mr., Mrs., Ms., Miss) (Married, Divorced, Single, Widowed, Remarried)</small> Father's occupation: _____ Work tel.: _____ Cell: _____ E-mail: _____ Father's licence plate #: _____ Mother's occupation: _____ Work tel.: _____ Cell: _____ E-mail: _____ Mother's licence plate #: _____ | Responsible for School Fees: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Non-resident parent <input type="checkbox"/> Other _____ |
| | Non-resident Parent Information Please complete where applicable. Title: _____ Last name: _____ First name: _____ Address: _____ _____ Send mail: <input type="checkbox"/> Y <input type="checkbox"/> N |
| CHILD INFORMATION | |
| Family name: _____ Student's cell: _____ School previously attended: _____ Sex (M/F): <input type="checkbox"/> Birth date: ____ / ____ / ____ <small>dd mm yy</small> Mother tongue (E, F, H, Y...) <input type="checkbox"/> Language at home (E, F, H, Y...) <input type="checkbox"/> | Given name: _____ Hebrew name: _____ Grade of entry: _____ Birth place: <input type="checkbox"/> Quebec <input type="checkbox"/> Other _____ Permanent code: _____ Medicare #: _____ Exp. _____ |
| EMERGENCY CONTACTS | |
| Name: _____ Telephone: _____ Relationship: _____ | Name: _____ Telephone: _____ Relationship: _____ |
| Office Use Only | |
| Date received: _____ | Family number: _____ |
| Admissibility certificate received: <input type="checkbox"/> Y <input type="checkbox"/> N | Birth certificate received: <input type="checkbox"/> Y <input type="checkbox"/> N |

