

Jackson Children's Academy

Student Registration

2025-2026

Student's Name _____ Student's Birthdate _____
Last First Middle

Student's Mailing Address _____ City _____ State _____

Student's Home Phone# _____ Student Gender _____ Male _____ Female

My child has a food allergy _____ No _____ Yes Explain _____

My child has diet restrictions _____ No _____ Yes Explain _____

My child has a medical/health condition _____ No _____ Yes Explain _____

Mother's Information		Father's Information	
Name:		Name:	
Address:		Address:	
Email:		Email:	
Home Phone:		Home Phone:	
Employer:		Employer:	
Position:		Position:	
Cell #:		Cell #:	
Work #:		Work #:	

Is there anything you want us to know about your child? _____

Siblings names and ages _____

How did you hear about us? _____

Program options (select one)

Threes: ____AM ____PM Fours: ____AM. ____PM Trans Kindergarten: ____AM. ____PM

Registration options - Circle days desired.

Three-year-old AM children may attend two M-W/T-TH or three days a week M-W-F/T-TH-F.

Four-year-old children may attend four M-T-W-TH or five days a week.

Transitional Kindergarten am children must attend five days a week and have at least one year of preschool experience.

Afternoon Threes attend T-TH 12:15-2:45 Fours & Transitional Kdg M-T-W-TH 12:15-2:45

\$200.00	\$230.00	\$260.00	\$290.00
2 days	3 days	4 days	5 days
M-W or T-TH	M-W-F or T-TH-F	M-T-W-T	M-T-W-T-F

Please return this form along with a \$75.00 non-refundable registration fee to

Jackson Children's Academy

9687 Portage St. N.W

Masillon, Ohio 44646

330-268-7377