Grace Valley Academy

20 Grove Ave. Groton, CT 06340 Phone: 860-941-3574 Email: office@gracevalleyacademy.org

Proverbs 22:6 Start children off on the way they should go, and even when they are old they will not turn from it.

Isaiah 54:13 All your children will be taught by the Lord, and great will be their peace.

3 John 1:4 I have no greater joy than to hear that my children are walking in the truth.

Grace Valley Academy Philosophy:

We believe that students are more than a score on a page so we adapt and differentiate to meet the academic needs of every student, in a Christ-centered environment that promotes and encourages their spiritual, educational, and social growth.

2025-2026 Registration Information:

Child's Physician's Name	
Physician Phone #	
Physician's Address	
Any current illness/diagnosis: yesno	_ Allergies/Intolerances: yesno
If yes, please explain:	
Any current medications being taken: yes	no
Does the child's family currently attend a chu	urch? yesno
If yes, which one?	Town:
Current/Last School	City
Current/Last Grade	
Has this child ever repeated a grade? yes	_no
If yes, which grade(s)?	_
Briefly explain the reason grade was repeated	1:

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Please circle that which applies: working below age level	working on age level	working above age level				
Does this child have a physical o	r emotional condition, or a l	earning difference or disability				
which has required special attention, or which might require special attention? yesno						
If yes, please explain						
Has this child had any disciplinat	ry issues at previous schools					
How were they resolved?						
Has this child been dismissed or	suspended from any school	? yesno				
If yes, explain						
Child's special talents or abilities): :					
Photo Release: My child is allo		taken and used on the GVA				
Facebook page or website. If yes, please initial:						

Emergency Contacts:

In the event that we cannot reach you, please list two emergency contacts who are authorized to pick up your child.

Name:		Relationship to Child:	
Phone:	_Email:		
Name:		Relationship to Child:	
Phone:	_Email:		
Parent/Guardian Name:			Date:

2025-2026 Membership Fees

Child's Name:

Registration Fee (due at the time of enrollment and non-refundable): \$200

Curriculum Fees are also due at the time of enrollment, are based on current publisher prices, and are non-refundable:

Grade K: \$200 Grade 1: \$207 Grade 2: \$261 Grade 3: \$222 Grade 4: \$296 Grade 5: \$296 Grade 5: \$296 Grade 6: \$358 Grade 7: \$399 Grade 8: \$373 Grade 9: \$316 Grade 10: \$368 Grade 11: \$460 Grade 12: \$385

Please check your registration needs below:

Elementary Program: M-F

_____ \$570 invoiced on the 1st of the month (9/1 thru 6/1)

Middle School Hybrid Program (grades 6-8)

*Students will have 2 full days of in-school and 2 days of at-home academic work with a 3-day weekend.

350 invoiced on the 1st of the month (9/1 thru 6/1)

1st choice: M/W

_____1st choice: T/Th

High School Hybrid Program (grades 9-12)

*Students will have 2 full days of in-school and 2 days of at-home academic work with a 3-day weekend. Program will consist of the minimum credit hours required to graduate and a high school diploma will be issued upon completion of credit hours.

\$400 invoiced on the 1st of the month (9/1 thru 6/1)

____ grades 9,10 M/W

_____ grades 11,12 T/Th

College Prep High School Hybrid Program (grades 9-12)

*Students will have 2 full days of in-school and 2 days of at-home academic work with a 3-day weekend. Program will include 1 additional 11th grade and 3 additional 12th grade courses. Students will receive transcripts with GPA's as well as a high school diploma.

\$450 invoiced on the 1st of the month (9/1 thru 6/1)

_____ grades 9,10 M/W

____ grades 11,12 T/Th

Invoices are created and auto-scheduled for the school year based off of choice(s) above.

Family Discount:

Second child 15% off, third child 20% off, 4th child 25% off, etc.

Payment Options:

All invoices are sent via email. You may pay the invoice directly through email with a debit/credit card (a 2.8% service charge will apply) or send in check/cash.

There will be a \$25 fee for returned checks.

A \$20 late fee will be added each week that an invoice remains outstanding. A child will be removed from membership at GVA if there are more than 4 weeks of outstanding invoices. **Before/After Care:** A service that is available to accommodate parent's work schedules. If this service is needed, please mark it below:

before care _____ \$20/week after care _____ \$20/week both _____ \$40/week

For planning purposes, please let us know your preferred drop off and pick uptimes.drop off:ampick up:pm

In the event of an unplanned occurrence and GVA needs to close for an extended period of time, membership fees cannot be refunded. If numerous inclement weather closures occur, days may be made up in June.

Parent/GuardianSignature:	Date:
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