

**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.

**Registration Information:**

Child Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_    Current Age: \_\_\_\_\_    T-shirt size: \_\_\_\_\_

Male \_\_\_\_ Female \_\_\_\_

Child lives with:

Both Parents \_\_\_\_\_ Mother \_\_\_\_ Father \_\_\_\_ Guardian \_\_\_\_ Other \_\_\_\_\_

Parent/Guardian Name(s)

\_\_\_\_\_

Mailing Address: Street/PO Box

\_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone(s) \_\_\_\_\_

Parent's Email \_\_\_\_\_

Child's Physician's Name \_\_\_\_\_

Physician Phone # \_\_\_\_\_

Physician's Address \_\_\_\_\_

Any current illness/diagnosis: yes \_\_\_ no \_\_\_ Allergies/Intolerances: yes \_\_\_ no \_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Any current medications being taken: yes \_\_\_\_\_ no \_\_\_\_\_

Please list: \_\_\_\_\_

\_\_\_\_\_

Does the child's family currently attend a church? yes \_\_\_\_\_ no \_\_\_\_\_

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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please circle that which applies:

working below age level

working on age level

working above age level

Does this child have a physical or emotional condition, or a learning difference or disability

which has required special attention, or which might require special attention? yes \_\_\_\_\_ no \_\_\_\_\_

If yes, please explain

---

---

---

Has this child had any disciplinary issues at previous schools? yes \_\_\_\_\_ no \_\_\_\_\_

How were they resolved?

---

---

Has this child been dismissed or suspended from any school? yes \_\_\_\_\_ no \_\_\_\_\_

If yes, explain

---

---

---

Child's special talents or abilities:

---

---

---

Photo Release: My child is allowed to have his/her photo 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 and are based on current publisher prices. Fees will be calculated when you enroll and the amount will be invoiced to you. These fees are non-refundable.

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 3.4% 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. After two weeks of outstanding fees you will need to keep your child home until fees are caught up. 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 \_\_\_\_\_ \$30/week      after care \_\_\_\_\_ \$30/week  
both \_\_\_\_\_ \$60/week

For planning purposes, please let us know your preferred drop off and pick up times.                      drop off: \_\_\_\_\_ am                      pick 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/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_