



2026 - 2027

Providing After-School Care and Enrichment for K4-5th Grade

Thank you for choosing Rebel Overtime for your after school needs. It is our goal to provide a safe, warm environment for students who need a place to stay after school and some days when school is not in session. We offer indoor and outdoor play, homework help, and many other enriching activities.

Rebel Overtime is open to all students, grades K4 - 5th.

Hours of Operation

After School: 2:30 - 5:30PM

Half-Days 11:30AM - 5:30PM

Full Days: 7:45AM - 5:30PM

Dates of Operation

Rebel Overtime will begin on August 13th and will follow the THA calendar and remain open on ½ days and full days when school is closed with the exception of: Labor Day (9/7), Columbus Day (10/12), Thanksgiving (11/23- 11/27), the week of (12-21 to 12-25) for Christmas, New Year's Day (1/1), Martin Luther King Day (1/18), President's Day (2/15), Good Friday (3/26) & Easter break (3/29), Spring Break (4/16), Memorial Day (5/31).

Bad weather and natural disasters will be determined on an individual basis.

School Year Rates: Please note that your account will be billed at the end of each month on FACTS and payment is due within 10 days.

After School:

\$8.00 per child, per day, if picked up by 4:00PM

\$12.00 per child, per day, if picked up after 4:00PM

Half Days:

\$10.00 per child, per day, if picked up before 2:30PM

\$18.00 per child, per day, if picked up after 2:30PM

Full Days:

\$25.00 per child, per day

Please send the contract directly back to Michele Bailey - Director - Phone #1-814-671-9488 – [mbailey@thomasheyward.org](mailto:m Bailey@thomasheyward.org). or drop off at the school before the first day of classes.



Enrollment Contract:

Student's Name: _____

Grade (2025-26): _____ DOB: _____

Parent(s)/Guardian(s) Names: _____

Student's Address : _____

Mom's Home Phone : _____ Cell Phone: _____

Dad's Home Phone: _____ Cell Phone : _____

Mom's email: _____ Dad's email: _____

Please list any allergies or special instructions for your student:

Anticipated days of attendance and pickup times (Please notify asap of changes):

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
CHECK THE DAYS OF ATTENDANCE					
PICKUP TIME					

Emergency Contacts: (In the event we are unable to contact parent/guardian)

Name: _____ Phone: _____

Name: _____ Phone: _____

Person(s) authorized to pick up student (not including parent):

Name: _____ Phone: _____

Name: _____ Phone: _____

The undersigned agrees to pay all applicable fees, including but not limited to late fee charges for overdue accounts and late pick-up fees associated with Rebel Overtime and to adhere to the policies and procedures of Thomas Heyward Academy as stated in the Thomas Heyward Academy Student/Parent Handbook and give permission for the above child to fully participate in the program.

(Signature of Parent/Guardian)

Date