

SAINT ANTHONY CATHOLIC SCHOOL

529 Chalan San Antonio Tamuning,, Guam 96913 Tel: (671) 647-1140/43 Fax: (671)649-7130 Website: www/sacsguam.org
Website: www.sacsguam.org

Angie Susuico Principal/Director Christy Borja Vice Principal



CREDIT CARD AUTHORIZATION

This is my authorization for automatic charges to be applied to my credit card for the payment listed below to include the transaction fee of 2.8% per transaction:

Parent/Guar	dian Name	Stud	lent/s Name		Homeroom
Period of Tran	saction/s: Monthly for	months	Date of N	Ionthly Transacti	on:
Monthly tuitio	on of : per month	+ 2.8%	= Total mo	onthly charge of :	
CARD INFORM	MATION:				
Name on Card: Print Card Holder Name			Type of Card	_ Type of Card (pls circle) VISA MASTER	
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