



Saint Anthony Catholic School

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

Angie Susuico
Mrs. Angie Susuico
Principal/Director

Website: www.sacsguam.org

Christy Borja
Mrs. Christy Borja
Vice Principal



STUDENT REGISTRATION FORM

STUDENT NAME: _____ Date of Application: _____
LAST FIRST MIDDLE

Mailing Address: _____ MALE: _____ FEMALE: _____

Home Address: _____ Home Phone: _____ Ethnicity: _____

Date of Birth: _____ Age: _____ Place of Birth: _____ Religion: _____ Citizenship: _____

MANDATORY: FOREIGN STUDENTS MUST PRESENT PASSPORT/VISA UPON REGISTRATION

Primary Language at HOME: _____ Living with: () PARENTS () FATHER () MOTHER () GUARDIAN

Last school attended: _____ Last grade completed: _____

Address of last school attended: _____ Grade entering SACS: _____

FATHER'S NAME: _____ Religion: _____
LAST FIRST MIDDLE INITIAL

CITIZENSHIP: _____ EMAIL ADDRESS: _____ OCCUPATION: _____

WORK PHONE: _____ CELL PHONE: _____ WORK ADDRESS: _____

EMPLOYMENT: _____ Private Sector _____ Local Government _____ Federal Government

MOTHER'S NAME: _____ Religion: _____
LAST FIRST MIDDLE INITIAL

CITIZENSHIP: _____ EMAIL ADDRESS: _____ OCCUPATION: _____

WORK PHONE: _____ CELL PHONE: _____ WORK ADDRESS: _____

EMPLOYMENT: _____ Private Sector _____ Local Government _____ Federal Government

BROTHERS/SISTERS CURRENTLY ATTENDING SAINT ANTHONY CATHOLIC SCHOOL

MUST IDENTIFY:

Caucasian
Chinese
Filipino
Indian
Japanese
Korean
Chamorro
Pacific Islander
Chuukese
Palauan
Kosraean
Marshallese
Pohnpeian
Yapese
Hispanic
African American

Name / Grade:

Name / Grade:

Name / Grade:

Name / Grade:

Please assist us in compiling a Business Listing for our SACS Families by providing us the following if APPLICABLE:

Type of BUSINESS OWNED: () Retail () Restaurant () Advertisement () Printing

() Other, please specify: _____ Contact Number: _____

Mailing Address of Business: _____ Fax Number: _____

MUST IDENTIFY:

MILITARY
ACTIVE DUTY
ONLY:

Air Force

Army

Coast Guard

Marines

Navy



A proud member of the National Catholic Education Association. Accredited by the Western Association of Schools & Colleges, the Western Catholic Educational Association, Cognia and its affiliated organizations.



IF STUDENT IS LIVING WITH A GUARDIAN, PLEASE FILL IN THE FOLLOWING:

(pls attach a copy of power of attorney or guardianship documents)

GUARDIAN'S NAME: _____ Relationship to student: _____

Guardian's Home phone: _____ Work Phone: _____ Occupation: _____

Guardian's Mailing Address: _____ Village: _____

PERSON RESPONSIBLE FOR THE FINANCIAL OBLIGATION/S OTHER THAN PARENT/GUARDIAN:

PRINT Name: _____ Relationship to child: _____

Mailing address: _____ Village: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Email Address: _____

Signature: _____

ENROLLMENT AGREEMENT FOR 2025/2026 SCHOOL YEAR

Student/s is/are hereby accepted by Saint Anthony Catholic School enrolled for the above school year, subject to terms of this Agreement. In consideration, the undersigned parent/s / guardian/s **AGREE** to pay the amount required for Tuition Fee, Registration Fee, Archdiocese Fee, Instructional Materials, Capital Improvement Fee/Maintenance Fee, Technology Fee, Endowment Fee, Graduation Fee (when applicable) along with ALL other required Fee/s (when applicable) for the above school year. **In addition it is agreed and understood that all fees are NON-REFUNDABLE and NON-TRANSFERABLE.**

initial

Ten (10) months payment plan: **FIRST PAYMENT DUE AUGUST 1, 2025** with the remainder of payments due on the **FIRST OF EACH MONTH, FINAL PAYMENT DUE PRIOR TO FINAL EXAMS.**

Payments made after the 15th of each month will result in a 10% late fee penalty.

initial

The Parent/s / Guardian/s shall make all payments when they become due, and if not made within sixty days (60), then the Parent/s / Guardian/s shall be in default of this agreement and the school shall have the right to terminate this enrollment and disallow the student/s to attend further classes or activities at the School.

initial

Further, the school shall be entitled to collect and receive all remaining balances due under this agreement regardless of the Student/s withdrawal, transfer or dismissal. Failure to make payments will result in the account being forwarded to the collections agency to include any and all collection fees.

initial

Accounts with delinquent financial obligations **WILL NOT** have access to exams.

initial

It is further understood that should payments be made with personal checks, which are returned unpaid for any reason Saint Anthony Catholic School will automatically refer the account (without notice to Parent/s / Guardian/s) to the collections agency for collection as provided by law.

initial

It is understood and agreed that by signing this Agreement for the current academic year, the Parent/s / Guardian/s hereby **ASSUMES, WARRANTS and GUARANTEES** payment of the tuition and all fees required and **AGREES and ACCEPTS** the rules and regulations of the school, and **AGREES** to carry forth that the Student/s complies with said rules and regulations.

initial

A THIRD-PARTY IS NOT RECOGNIZED TO ACT ON MY/OUR BEHALF.

initial

Father's Signature _____

Date _____

Mother's Signature _____

Date _____

As of 2/28/25

DO NOT WRITE HERE FOR
BUSINESS OFFICE USE
ONLY:

Rec'd By: _____

Date: _____



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AGREEMENT RESPONSE

Please make sure that you read the handbook online before signing this form.

Registration form will NOT BE official until this form is signed and attached upon registration.

STUDENT NAME	HMRM	STUDENT NAME	HMRM
STUDENT NAME	HMRM	STUDENT NAME	HMRM

STUDENTS:

I do hereby certify that I have read the Saint Anthony Catholic School Student/Parent Handbook for **2025/2026 SY**. I, hereby agree to abide by, support and be governed by the philosophy, principles, rules and regulations enunciated therein. (see attached Cell Phone and Truancy policies).

INITIALS

I recognize that my conduct both on and off campus and at all times while I am studying at Saint Anthony Catholic School must be in a manner consistent with the philosophy, principles, rules and regulations stated herein.

INITIALS

I further acknowledge and accept that Saint Anthony Catholic School may suspend, expel, or terminate my enrollment and/or impose any appropriate sanction that Saint Anthony Catholic School so desires against me because of my failure to adhere to and abide by the philosophy, principles, rules and regulations of Saint Anthony Catholic School.

INITIALS

PARENTS/GUARDIANS:

I/We _____ and _____ parent/s- guardian/s do hereby, certify that I/We have read the Saint Anthony Catholic School Student/Parent Handbook for **2025/2026 SY** and agree to abide by, support and be governed by the philosophy, principles, rules and regulations enunciated therein. In addition to this agreement and attached Truancy and Cell phone policies, an Administrator or designee may require a student suspected of possessing a controlled or illegal substance, a weapon or stolen property, to empty his or her locker, book bag, wallets, purse, or pockets. We pledge our support as parents/guardians and will fulfill our obligations and financial responsibilities to the school; and shall endeavor to participate actively in the spiritual and social functions as manifested in the School Calendar of Events and other special announcements.

INITIALS

MORNING DROP OFF BY 7:15 AM

INITIALS

I/We promise to pick up our child/ren right after school between **3:00 pm and 3:30 pm**. If our child/ren is/are a member of any after school activity, e.g. Honor Choir, Interscholastic Sports, Math Counts, Spelling Bee, NatStuco, NJHS, Campus Ministry, Lego Robotics, Chess Club, ACB, Art Club and/or Lead roles (Christmas or Spring Concert) we promise to pick him/her up after the activity, the time of which will be made **KNOWN TO US BY OUR CHILD OR BY THE TEACHER/ADVISOR**.

INITIALS

I/We recognize that our child/ren must conduct himself/herself both on and off campus and at all times while attending Saint Anthony Catholic School in a manner consistent with the philosophy, principles, rules and regulations of Saint Anthony Catholic School.

INITIALS

Furthermore, we grant permission to have our child's/children's name published in the school's yearbook and in the event exemplary academic, athletic, and/or accomplishments to be featured in the local media and school newsletter.

While every effort is made to ensure the accuracy of the information contained in the Saint Anthony Catholic School Student/Parent Handbook, the administration reserves the right to make necessary changes without prior notice. Parents will be informed of any revisions through our newsletters, memorandums, Facts Sis and/or School Website.

Father's /Guardian's Signature

Mother's / Guardian's Signature

Date

as of
02/28/25



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