



3731 State Hwy 35 S. Port Lavaca, TX 77979
Call 361.552.7823 x 3 or Fax 361.552.1298

Credit Card Authorization

This form authorizes Safety Council of the Texas Mid-Coast, Inc. to use the method of payment chosen below to collect payment for service(s) rendered. This information provided will be stored in our secure database for future payments on your account. All information storage complies with applicable privacy and security laws and will not be shared with any other person(s) or entities. For full details on our privacy policy, please visit our website at www.cscportlavaca.org

Please PRINT all information clearly!

Date: ___/___/___

Subscriber ID# _____

Your Name: _____ Title: _____

Company Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone Number: (____) _____ Fax Number(____) _____

Email Address: _____

(this email address will receive all transaction receipts)

Please choose one of the following methods:

CREDIT CARD

Credit card type: (please circle one) VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card Number: _____

Expiration date: _____ Security Code: _____

Authorized Signature: _____

Printed name: _____

Effective July 7th, 2016, credit card transactions will be assessed a processing fee of 5% of the total amount of the transaction.

Please PRINT this form and fill in ALL blanks. You may fax this completed form to 361.552.1298. Thank you!
Our mission is to provide workforce training compliant with regulatory requirements to promote a safe and healthy workplace. At SCTMC, we value our customer through a commitment to quality safety training. Our commitment is illustrated by our clear communication, accurate recordkeeping, excellent customer service and corporate integrity.