



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](http://www.cscportlavaca.org)

Please PRINT all information clearly!

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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)

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### CREDIT CARD

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

Credit Card Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

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Please PRINT this form and fill in ALL blanks. You may scan your signed form and email to [customerservice@cscportlavaca.org](mailto:customerservice@cscportlavaca.org) or fax 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.