
Canadian Simmental Association

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Facsimile: 403-250-5121
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Home Page: <http://www.simmental.com>

Dear Member,

Please complete Credit Card Privileges form and return to us by fax or mail at your earliest convenience if you would like to pay for services / products by credit card.

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Account No.

CREDIT CARD PRIVILEGES

I, _____ of _____

HEREBY AUTHORIZE AND REQUEST that the Canadian Simmental Association charge any fees to process and complete Simmental registry services, memberships, lab fees, Simmental Country ads and services, or such other miscellaneous services and products as requested by myself

to my **Credit Card Account No.** _____

The name on the above Credit Card is _____

Expiry Date: _____ **Visa:** _____ **Master Card:** _____

CSA Account No on which this card is to be used: _____

Phone No: _____

Date: _____
_____ Personal Signature of Credit Card Holder