

\*\*\* Optional \*\*\*

**DO IT...IN A**  
**Skid-O-Kan**



For your convenience, we accept all major credit cards.  
You can pay your account by phone. Please, fax or mail this form to our office.

Please apply by credit card payment to:

Skid-O-Kan  
622 McBride  
Corpus Christi, Tx 78408  
361-883-6642 FAX 361-882-5351

Highest Authorized Charge Amount \$ \_\_\_\_\_

Once     Monthly     Yearly

VISA     M/C     Discover     American Express

Cardholder's Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Security Code (3 digit # on back): \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Special Instructions:

\*\*\*Use confirmation below OR email to \_\_\_\_\_\*\*\*

Fax invoice & receipt to this number: \_\_\_\_\_

Mail invoice & receipt to this address: \_\_\_\_\_

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