

# VALIDATION ORDER FORM

## CUSTOMER INFORMATION

Institution:	Billing Address:
Department Name:	Contact Name:
Contact Email Address:	Contact Number:

## ORDER INFORMATION

Validation Prices	Quantity	Price	Total
\$5.00 off		\$5.00	
\$9.00 off		\$9.00	
\$10.00 off		\$10.00	
\$12.00 off		\$12.00	
\$14.00 off		\$14.00	
\$15.00 off		\$15.00	
\$19.00 off (Full One Day Validation)		\$19.00	
<b>Delivery Fee</b>			
<b>Order Total</b>			

## DELIVERY METHOD

- Pickup     
  Courier/Mail \$20.00 fee (plus tax if applicable)     
  Rush \$35.00 fee (plus tax if applicable)  
*(Courier delivery within Texas Medical Center area)*

## PAYMENT METHOD

- CHARGE CREDIT CARD   
  VISA   
  MASTERCARD   
  AMEX   
  DISCOVER

Only enter the last 4 digits of the Credit Card Number – We will contact by phone and/or email online payment instructions to complete the transaction.	Expiration Month/Year	Name on Credit card
	Billing Address Zip Code	

- AUTOMATIC DEBIT (ACH DEBIT) FROM CHECKING ACCOUNT  
 WE WILL EMAIL ONLINE PAYMENT INSTRUCTIONS TO COMPLETE THE TRANSACTION.

Bank Name

- CHECK#: \_\_\_\_\_     
 MAIL CHECK TO:     
 LAZ Parking/Texas Medical Center, Validation Services  
 2450 Holcombe Blvd., Suite 1, Houston, TX, 77021-2040  
  
 Authorized by \_\_\_\_\_     
 Date \_\_\_\_\_

## IMPORTANT INFORMATION

- **Minimum quantity sold per order is 10 prepaid tickets at any validation price.**
- Do not copy the printed validations. The validation is unique and once used cannot be used again.
- When using printed validations, affix to the back of the ticket. Do not cover the barcode located on the front of the ticket.
- For questions or assistance, please contact us by email at [validations@tmc.edu](mailto:validations@tmc.edu) or by phone at 713-791-6450.

\_\_\_\_\_  
 Delivered by (Printed Name)      Date     
 \_\_\_\_\_  
 Received by (Printed Name)      Date