



**Your Partner in PUBLIC SAFETY**  
**New England**

**New England Section – IMSA**

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(617) 431-4827 Fax

**Credit Card Payments:**

- Type of Card: (circle one)      Visa    Mastercard    Discover
- Name on Card: \_\_\_\_\_
- Card Number: \_\_\_\_\_
- Security Code (3 digits on back of card): \_\_\_\_\_
- Expiration Date: \_\_\_\_\_      Amount Charged: \_\_\_\_\_
- Cardholder Address: \_\_\_\_\_

**Contact Info: (Credit Card and Check Payees)**

- Student Name: \_\_\_\_\_
- Class(s): \_\_\_\_\_
- Name: \_\_\_\_\_
- Phone #: \_\_\_\_\_
- Email: \_\_\_\_\_

**Check Payments:** (Make checks payable to **NEIMSA, Inc.**)

**Mail or Fax this form to the above address or number.**