



ID Card Authorization Form

Please fill this form out then fax to 912-537-4894

I authorize and accredit the Police & Sheriffs Press, Inc. to produce ID Cards for the:

Agency Name: _____

Head of Agency: _____

Date: _____

Shipping Address: _____

City: _____

State, Zip: _____

Phone Number: _____

24 hour Number: _____

Fax Number: _____

Email Address: _____

Number of Employees: _____

Design Choice:

Flag Generic
free set-up

State Outline Generic
free set-up

Custom
\$150.00 set-up fee

Head of Agency please sign in the box below.