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**MSF™ Motorcycle Safety Foundation® Training**

**Individual Request for Replacement MSF™ Course Completion Card**

Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address at time of course completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (month/day/year)

MSF Course for replacement card (circle):

BRC Beginning Rider Course: BRC

IC Intermediate Rider Course: IC

EC Experienced Rider Course: EC

ARC Advanced Rider Course/Sport Bike Techniques

Month and Year (MM/YYYY) of MSF Course Completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License state & number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Technical College sponsoring MSF® course taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Complete this form
2. Enclose a check or money order for $15, payable to the **SC Technical College System**. Requests received without a check or money order will not be processed.
3. Mail this completed form and the check to:

**South Carolina Technical Education System**

Motorcycle Safety Training Program

MSF™ Card Replacement Request

Academic Affairs Division

111 Executive Center Drive

Columbia, SC 29210

**SCTCS will process all requests on a monthly basis. There is no guarantee that existing records will confirm and result in a replacement MSF card, to replace the original issued to the holder by the RiderCoach.**

**There will be no refunds for any request.**

**Replacement cards will be shipped via USPS.**