

Green Leaf Psychological Services, Inc.

Credit Card Authorization Form - Assessment

- Please complete all fields.
- Payment for provided services is due when you attend your final feedback session *or* if you choose not to complete the full assessment.
- Your card will only be charged by Green Leaf if the bill is not paid when the assessment is complete *or* if you discontinue the assessment and do not pay for services already provided.
- You may choose to pay via another method during your feedback session.

Credit Card Information				
Card Type:	□ MasterCard	□VISA	\Box AMEX	
	[□] Other			
Cardholder Name (as shown on card):				
Card Number:				
Expiration Date (mm/yy):				
CVV (security code on the back of your card):				

I, ______, authorize Green Leaf Psychological Services to charge my credit card above for agreed upon services if my bill is not paid. I understand that my card information will be destroyed when the fee has been paid in full.

Client Signature

Date

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