



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: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> 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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