

## MERIDIAN COUNSELING SERVICES

### CREDIT CARD AUTHORIZATION

As out of network providers, we collect payment at the time of service. Credit cards may be run in the event that you forget to bring cash, check or a valid credit card to your session. Credit cards may also be debited in the event that you fail to give at least 48 hours notice for missing an appointment. This form authorizes **Meridian Counseling Services (MCS)** to debit your credit card for the purposes listed above.

By your electronic signature of this form, you authorize Meridian Counseling Services to charge your credit card through Stripe via SimplePractice for session fees accrued while in treatment with Meridian Counseling Services. This does not provide authorization for any additional unrelated debits or credits to your account. These charges will appear on your bank/credit card statement as [STATEMENT DESCRIPTOR]. You have the right to request a paper copy of this document.

BY SIGNING THIS FORM, I AM GIVING AUTHORIZATION ON THE FOLLOWING:

I am the owner of this credit card and will not dispute these scheduled transactions with my bank or credit card company as long as the transactions correspond to the terms indicated in this authorization form. I acknowledge that credit card transactions could be linked to Protected Health Information.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_