**CREDIT CARD AUTHORIZATION FORM**

Below is a credit card authorization form. This information will be used to collect payment for counseling services when you fail to notify your therapist at least 24 hours in advance before a cancellation.

If your credit card information changes after your submit this form to your therapist, we require that you complete a new form with the new card information at your next session.

We retain the right to terminate therapy for failure to pay for sessions.

If you have financial difficulties that prevent you from paying for therapy, please discuss this with your therapist. A no-show for you is a no-show for someone else who could have used the appointment time you miss.

