

ELEVATE

COUNSELING SERVICES, INC.

117 EASTMAN ST #102, So EASTON, MA 02375
116 MECHANIC ST. #7, BELLINGHAM, MA
695 WAREHAM ST, SO MIDDLEBORO, MA 02346
PH: 508-202-1811 FAX: 866-773-4171

CREDIT CARD "on file" AUTHORIZATION FORM

For my convenience of payment of deductibles, co-payments, private pay fees and cancellation fees, to Elevate Counseling Services, for services rendered, I am providing my credit card, debit card or health spending flex card information to be kept on file and to be billed to my account within 2 business days of receiving services or incurring fees. I will receive email or text confirmation of payment. Statements of payment can be mailed monthly upon request as well. I understand that this card will be copied, front and back and that this information will be kept confidential, will be scanned and uploaded into my electronic record and shredded by a HIPPA compliant shredding company. It is my responsibility to provide my counselor with updated card information as needed.

This is an optional service. I am not required to provide this information. If I choose not to provide this information, I understand that all deductibles, co-payments, private pay and cancellation fees must be paid at the time of treatment by check to Elevate Counseling Services, Inc. as an alternative to keeping an authorized card on file. Cash will be accepted in exact amounts only. I understand that Elevate Counseling Services requires a zero balance due at all times. This authorization expires upon termination of treatment.

Name on card _____

Client Name (print) _____

Credit Card # _____ 3 digit code on back _____

Expiration date _____ Billing Zipcode _____

Send text or email confirmation of payment to: _____

I am agreeing to the terms and conditions set forth above.

Client/guardian signature: _____ Date: _____

Provider signature: _____ Date: _____

I decline this service and will keep a zero balance by paying fees by check or cash at time of service or when fees are incurred.

Client/guardian signature: _____