



DC VA Counseling Psychotherapy

DC VA Counseling Psychotherapy, LLC

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Client Payment Agreement

To best provide services for you and to be in compliance with insurance and/or business practice policies, DC VA Counseling Psychotherapy LLC recognizes the following client payment agreements:

A credit/debit card is required on file at all times to secure payment for services.

Copayment/Coinsurance and self-pay client fees are due at the time of the services at the beginning of each session.

We use Square Up (fee plus cc processing fee) to process payments, which is HIPPA compliant and encrypted application for the secure storage of your information. Depending on the therapists, payments might be due at the time of the session, or charged at once monthly.

Missed appointment/Late cancelation fees will be charged to your credit card on file in accordance with the cancelation and missed appointment policy found in your Service Agreement Contract..

Visa _____ MasterCard _____ Discover _____ AMEX _____
(All card information is confidentially secured for your protection)

Credit Card Number: _____

Expiration Date: _____ 3-digot CV#: _____ (on back of the card)

Cardholder Name: _____

Street address: _____

City/State: _____ Zip code: _____

Telephone Number: _____

E-mail Address: _____

- *I have read and understood the above information regarding my payment agreement with DC VA Counseling Psychotherapy, LLC. Please process my credit card on file for my counseling payments. (I understand a cc processing fee will be included).*

Charges will be reflected on your credit card or banking statement.

& Signature of Cardholder: _____

Client Name if different than cardholder: _____
(i.e., spouse or child, etc)