



# Dr. Lacy Olson-Ayala

www.DrOlsonAyala.com • info@drolsonayala.com • Phone: 424.653.6175

## Credit Card Authorization Form

Valid credit card is required to schedule initial session. By signing this form, you are authorizing Dr. Lacy Olson-Ayala to charge the credit card listed below for psychotherapy service fees on the day of service.

Fees range from \$345 to \$500 depending upon the nature and length of the session:

Initial 50-minute Intake – \$345

50-minute Therapy Session – \$345

80-minute Therapy Session – \$500

Name on card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Number: \_\_\_\_\_

CW Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date