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Anxiety
Depression
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I do take payment in the form of check or cash. I will also take credit cards and prefer to use them at the end of each session. However, sometimes people forget their cards or miss a session. In order to prevent balances from growing, please fill out the following information. This form will be securely stored in your clinical file and may be updated or cancelled upon request at any time.

I, _____, am authorizing Dr. Lois Sharp, Ph.D. to use my credit card information to charge my credit card for agreed-upon sessions or in the event that I do not notify her of my inability to attend a scheduled therapy appointment at least 48 hours in advance as agreed to in the signed Psychotherapist-Patient Services Agreement.

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