

## **Alison Howard & Associates**

Alison M. Howard, M.Ed, Psy.D., CGP  
Clinical Psychologist  
2828 Wisconsin Ave NW  
Washington, DC 20007  
www.alisonhoward.com  
202-368-3501

### Credit Card Guaranty of Payment

As a service to our patients, we offer credit card processing. If you choose to use your credit card as your method of payment, your card will be charged per session, including the 2.7% processing fee through TherapyNotes. You will receive a bill at the end of each month detailing the charges and the service codes required by most insurance companies. If you are using a credit card, your bill will reflect a zero balance.

Please read and complete the following:

I understand that Alison Howard and Associates will be billing me for therapy for each session we meet, or for the agreed upon amount for evaluation services. I also understand that I am responsible for payment of services, and that if for some reason the credit card is canceled or declined, I will pay the invoice in another way. I understand that Dr. Howard uses the credit card company CardPointe through TherapyNotes.

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Patient Name

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Cardholder Name (if different from the patient)

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Cardholder Billing Address (including zip code)

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Type of Credit Card (Visa, Master Card, or Discover)

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Credit Card Number

Security Code

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Expiration Date

I authorize Dr. Alison Howard to charge my credit card for services rendered by my therapist at Dr. Alison Howard and Associates:

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Signature

Date