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CREDIT CARD AUTHORIZATION

Every client is asked to sign a Credit Card Authorization Form at the first appointment. When you attend a session, you may pay with the credit card already authorized or by an alternative method if one has been arranged in advance. Your card will not be charged for a session without your permission. Your credit card authorization will be kept on file.

*****Please Note: Sessions cancelled less than 48 hours in advance will be charged the full session fee.**

Client Name: _____

Name on Card if Different: _____

I authorize Sherry Gaba, LCSW, to charge my card for professional services.* Charges will appear on your card statement as Sherry Gaba, LCSW.

***Note: A \$2.00 credit card processing fee will be added to your session fee amount.**

Type of Card: VISA MasterCard

Card Number: _____

Security Code (found on back of the card): _____ Expiration Date (MM/YY): _____

Card Holder's Billing Address for Monthly Card Statements:

Cardholder Signature

Today's Date
