Payment Information

Payment can be made in the form of cash, check, credit card or debit card.

I use the MxMerchant system for payment and invoices. I chose this system based on its high level of security and functions. This system allows me to input your credit or debit card information to store for future sessions. The system is PCI-compliant, which meets the standards for HIPAA compliance. In part, this means that once I input your information, I no longer have access to your full account number; only the last 4 digits will show. Additionally, the system requires log-in, is password-protected, and does not reside on a device; it is web-based.

Whatever form of payment you choose, I will send you a receipt after the payment has been processed. Please indicate below whether you would like this receipt sent via email or if you prefer to receive a printed copy from me. If emailed, please note that the email is generated from the billing system, so please do not email back to that address.

You may change your payment type at any time. Please inform me if you would like to make a change.

I will be making payments by:
Cash □　　　　　Check □　　　　　Credit Card □　　　　　Debit Card □

How would you like to receive your receipt?

Print　　□　　　　Email*　□ _____

(email address)

*By providing my email address I am giving Stacie B. Isenberg, Psy.D., PLLC permission to contact me via this email address. I understand that email cannot be guaranteed to be secure or error-free as information could be intercepted, corrupted, lost, destroyed, arrive late or be incomplete, or contain viruses. I understand that Stacie B. Isenberg, Psy.D., PLLC does not accept liability for any errors or omissions which may arise as a result of email transmission or texting.

Patient Name *as you would like it to appear on receipt*: _____

Cardholder Name: _____

Cardholder Billing Address: _____

_____

Cardholder Signature: _____

Date: _____

By providing your credit/debit card information you are agreeing for it to be stored in the aforementioned system and used for payments. The information below this line will be shredded after it is entered into the system.

Account Number:

Expiration Date: month_____　　　year_____

Security Code: