



Dr. Mona Shenassa Toubian

REVOLUTIONARY WELLNESS • SOUL WORK EVOLUTION

CREDIT CARD AUTHORIZATION

I, (print name) _____ authorize my credit card for any services rendered as agreed to. I also authorize MST International Inc. to charge my card in the event I fail to show for a scheduled appointment, or do not give notification of my inability to attend a scheduled appointment at least 72 business hours in advance. I further authorize MST International Inc. to disclose information about my attendance/cancellation to my credit card company if I dispute a charge. I acknowledge that I am aware there is a \$35 fee for any declined credit card charge (or for a bounced check).

*Most people pay via Zelle or Venmo. However if you choose to pay by credit card there will be a 3.5% processing fee added.

*\$350 per 45 min hour paid before or directly after services are rendered. Two hour slots are therefore 90min long.

*Every minute used beyond 45 min hour service time is charged in 15min increments.

*Every minute beyond the 90 min two hour increments is charged in a 15min increments up to 1hr 55min and charged at 30min increments beyond that.

Card Type:

Card #:

Name on Card:

Billing Address (Street, City, State & Zip):

Expiration Date:

CVV: (last 3 numbers on back of card)

Signature: _____ Date: _____

*Cancellations must be made at least 72 hours in advance or fee must be paid in full and I am aware there is a \$35.00 fee for declined credit cards (or \$35 for a bounced check).

This form will be securely stored in your clinical file and may be updated upon request at any time. Please note, your credit card will not be charged unless the following conditions apply: Therapy session was attended by you, the client, or you were a no-show for a scheduled appointment, or you failed to cancel less than 72 business hours in advance, allowing us to reschedule other clients in the session slot.