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CARD ON FILE AGREEMENT

Date: _____

I understand that this agreement will expire 1 year after filling out this form.

I agree to allow The Parenting Institute to charge my credit card for my session fees (up to \$150), court summary compilation (\$300 paid in advance), or for consultation with other agreed upon providers (\$100). If for any reason, the Counselor is called to testify or provide any evidence whatsoever on behalf of a party or parties hereto, the party or parties causing the same will pre-pay all of the Counselor's costs, hourly fee, and reasonable expenses (\$300 per hour/ 4 hour minimum).

I also acknowledge that:

- My credit card will be charged after every session while this agreement is in effect.
- The Parenting Institute will send me a receipt that details the amount charged

Payment Information

Card type: _____

Cardholder name: _____

Card number: _____

Expiration Date: _____

CVV number: _____

Billing Zipcode: _____

Cardholder email: _____

Cardholder signature: _____

Printed name of cardholder: _____