

Orange County Family Therapy
Individuals* Couples* Families* Adolescents* Marriage

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Credit Card Authorization Form

Please complete all fields. You may cancel this authorization form at any time by contacting: Orange County Family Therapy at 949-342-5638. This authorization will remain in effect until canceled.

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(State)

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I, _____, authorize Dr. Zand of Orange County Family Therapy to charge my credit card above for agreed upon purchases. I understand that my information will be saved on file for future transactions on my account.

Would you like a receipt sent via text OR email: No Yes

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