

**Faithful & True Ministries, Inc.**

**ATTN: PEG KIRKVOLD**

15798 Venture Lane

Eden Prairie, MN 55344

Phone: 952-934-4856

Fax: 952-746-3897

[peg@faithfulandtrueministries.com](mailto:peg@faithfulandtrueministries.com)

**Faithful & True Ministries** prefers not to bill for individual or group therapy sessions. Payment should be made at the time of service OR you may keep your credit card number on file for the Accounts Manager to charge automatically. Your charges will be shown as "Faithful & True Ministries" and will appear on your card approximately 3-7 days following your actual group/individual session. If you would like to pay by credit card for your session(s), please fill out the form below and bring it in at the time of your appointment or you can mail, email or fax it to me at the address or fax number shown above. All information is confidential and will be used only when you authorize me to do so. If you would like me to keep your credit card number on file and have me automatically charge your credit card after each session you attend, please check the appropriate line below.

Thank you,

*Peg Kirkvold*  
*Accounts Manager*

-----  
**Authorization for Credit Card Payment**

**Name:** \_\_\_\_\_

**Card #:** \_\_\_\_\_

**Verification Code (by signature line on back):** \_\_\_\_\_

**Expiration Date (mm/yy)** \_\_\_\_\_ **Amount:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Please charge only for the amount I have indicated above**

\_\_\_\_\_ **Please keep my credit card on file and automatically charge for all sessions indicated below:**

\_\_\_ **Counseling-husband**    \_\_\_ **Coaching-wife**    \_\_\_ **Counseling-couples**

\_\_\_ **Group-husband**    \_\_\_ **Group-wife**