

TIMOTHY M LANE, PH.D., PLLC

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Payment Options

Instructions: Full payment is due at the time of each session. I accept cash, checks, or MasterCard, Visa, American Express and Discover Cards. (Checks should be payable to "Tim Lane"). Please fill out this form and bring with you on the first session (unless the same information was provided on my online intake information form).

Patient(s) name: _____

If you wish to pay with a credit card, you may submit the information below for the credit card you wish to use. This information will be kept in a secure electronic format and this paper form will be destroyed.

To pay by credit card (fill out next few lines)

Name on card _____

Card number _____

Security number on card (3 or 4 digits) _____

Expiration date on card _____

Billing address for card _____

A receipt will be provided to you for payments made. Receipts may be emailed to you if requested, mailed or printed and given to you at the following session.

If you wish, I will provide all information necessary for you to work with your insurance company to receive whatever reimbursement they may provide for out-of-network provider services.

Signature of card holder

Date

(For ongoing clients, a discount fee may be arranged for multiple sessions paid in advance on one credit card charge. If interested, please discuss this with me.)

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