

# HEALTHY MINDS FOR HEALTHY LIVES

Merrill Wood DNP, APRN, CPNP-PC, PMHS, BICBT-CC  
www.healthymindsforhealthylives.com  
admin@healthymindsforhealthylives.com  
940-757-1943

## Card on File Agreement

I agree to keep a valid credit/debit card on file for outstanding charges to my account. I authorize Healthy Minds for Healthy Lives-Pediatric Mental Health to keep my card in the secure Athena Healthcare network. I authorize Healthy Minds for Healthy Lives to charge my card for any copays, self-care fees, and/or any amount not covered by insurance. I agree to update Healthy Minds for Healthy Lives with my credit/debit card information if it expires or I obtain a new card.

Thank you for your understanding. As a new business, it is vital to receive payments so that I am able to serve your child/teen and other children/teens in this area.

Patient/Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Patient/Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Kindly,

Dr. Merrill Wood, DNP, CPNP-PC, PMHS, BICBT-CC