

Joyce Starks, MSW, LCSW
459 East 1000 South
Pleasant Grove, UT 84062
801-989-1992
joyce@joycestarks.com

BISHOP'S AUTHORIZATION FOR PAYMENT OF SERVICES

Client(s) Contact Information:

Name(s): _____

Address: _____

Phone number: _____ Email: _____

Bishop Contact Information:

Name: _____ Ward: _____ Stake: _____

Preferred contact address: _____

Preferred contact phone number: _____

Preferred contact email address: _____

(Monthly Billing Statement Invoices are sent to Bishop's email address)

Bishop's Comments:

Checks are gladly accepted from Ecclesiastical entities only. Please make checks payable to Joyce Starks, and mail payment on the Sunday immediately following receipt of Billing Invoice.

Terms: The fee for all sessions (75-minute Assessment Session and 50-minute Regular Session) is \$150.00 per session. Payment must be received by Joyce Starks no later than 30 days after the date of the Billing Statement Invoice. If balance due remains unpaid after 30 days, a new Billing Statement will be sent, reflecting an added 10% Late Fee. After 60 days, a new Billing Statement will be sent again, reflecting a 20% late fee applied to the balance due, etc. Clients must pay their portion prior to each session via the Pay Pal link on my website, joycestarks.com.

No Show/Late Cancellation Policy: If Client(s) are a No-Show for any session, or cancel without giving 24-hour notice, the full fee is still due for the 1st and 2nd occurrences, and if a 3rd incident occurs, the full fee is due, and no further sessions will be scheduled with Client(s).

Bishop hereby authorizes payment of services on behalf of the above named Client(s). The Bishop and Client(s) agree to pay Joyce Starks according to the terms explained above.

Client(s) Signature(s)

Date

Bishop's Signature

Date

Bishop and Client(s) are encouraged to make copies of this Agreement for their records. Please return signed original Agreement to Joyce Starks prior to receiving services.