Whole Family Medical Care, LLC
28442 E River Rd, Suite 204
Perrysburg, OH 43551
Phone 419-872-3250   Fax 419-872-3258
www.wholefamilymedical.com

ACUPUNCTURE MEMBERSHIP PLANS:

Please initial under your choices

Acupuncture-Only Membership	12-Visit Plan	20-Visit Plan	Add-On 5 Visit Increments
$360 upfront	$49/mo. for 12months ($948 total)	$67/mo. for 12 months ($1164 total)	Must continue/finish initial payment plan as well; additional $270
Your initials here:	Your initials here:	Your initials here:	Your initials here:

A la carte acupuncture sessions are available for $108 to $162 with initial fee $258.

To compare with above pricing:

- **12 visits=$1554 to $2202**
- **20 visits=$2418-$3498**
- **5 add-on visits=$540 to $810**

Today's Date: ___________________

Please circle card type: ***Visa / MC / AMEX / DISC*** ***Expiration date***______________________

Card Number _____________-_____________-_____________-_____________

Patient(s) name: ____

Additional names to add to this card: ____

Address to which credit card is billed: ____

Name of card holder (if not patient) and relation to patient: _____________________________________

X ____

Signature of Cardholder as it appears on card

Account Number: ________________________ ***Physician:***____

Credit/Debit card Consent Form

I authorize Whole Family Medical Care, LLC to maintain my credit/debit card information for payment according to the above agreement. I understand that this form is valid until I provide written notice that it is revoked (after all balances are paid in full.) I also understand that if I change charge cards, I will supply Whole Family Medical Care, LLC the new credit/debit card information.