



**THREE OAKS CENTER, INC.**

6077 Far Hills Ave., #157 Centerville, OH 45459  
937-520-8496  
Kevin@ThreeOaksCenter.com  
ThreeOaksCenter.com

**You can charge your fees**

If paying by credit card, complete form and return:

Early Intervention Program  
Three Oaks Center, Inc.  
6077 Far Hills Ave.  
#157  
Centerville, OH 45459

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
**CARD NUMBER**

**CARD EXPIRATION DATE** \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
**CARD ID # OR 3 DIGIT VERIFICATION #**  
(Appears on back of card)

\_\_\_\_\_  
**NAME OF CLIENT (if different than Cardholder)**

\$ \_\_\_\_\_



**AMT TO BE PAID**

I hereby agree to pay the sum set forth above to the bank which issued my card in accordance with the terms of the credit card agreement for the purchase of goods and services. Your statement will reflect a charge to Three Oaks Center.

\_\_\_\_\_  
**AUTHORIZED SIGNATURE** **DATE**

\_\_\_\_\_  
**PRINT NAME (as it appears on card)**

\_\_\_\_\_  
**BILLING ADDRESS (of Cardholder)**

\_\_\_\_\_  
**PHONE NUMBER (of Cardholder)**