

Wood Christian Counseling  
Brent Kirkley, LPC, LMFT  
3800 Paluxy Dr. Ste. 240  
Tyler, Texas 75703  
Office: (903) 283.8729 \* Fax: (888) 454.9083

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Insurance Billing Information

Name on Card: \_\_\_\_\_

Mbr ID# \_\_\_\_\_

Group # \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_

Plan Name/Code \_\_\_\_\_

Claims Mailing Address: \_\_\_\_\_

Benefit / Eligibility Phone: \_\_\_\_\_

Out of Network Benefits: ( ) Yes ( ) No

If yes, Copayment Amt: \_\_\_\_\_

Authorization Needed: ( ) Yes ( ) No

Session Allowed Per Year: \_\_\_\_\_

Out of Pocket Max: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Client or Guardian

\_\_\_\_\_  
Counselor Signature