



JUVENILE REHABILITATION - REFERRAL FORM FOR TEAMCHILD LEGAL SERVICES

To make a referral to TeamChild:

1. Fill out the two boxes below.
2. Fax the referral form to TeamChild at (206) 381-1742.

If you have questions, please call TeamChild at (206) 322-2444 x101,
or toll free at (877) 295-2714.

POTENTIAL CLIENT
Name: _____
Date of Birth: _____
Date of Referral: _____
Facility / Cottage: _____ _____
Phone # for Youth: _____
Case Worker or JR Contact: _____
Case Worker's Phone #: _____
REASON FOR REFERRAL
Please briefly describe what help may be needed: _____ _____