

# Halton Access and System Navigation Referral Form



## **Client Information:**

First Name:

Last Name:

Date of Birth:

Gender:

Address:

City:

Postal Code:

Home Phone Number:

Cell Phone:

E-mail:

Preferred  
Communication  
Method:

**Should be where we can leave a secure message.**

Preferred Language:

Requires  
Interpreter:

Additional Service  
Considerations:

Hearing Impairment  
Developmental Delays  
Sight Impairment  
Wheelchair Access Required

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## **Parent/Caregiver Information:**

Parent/Caregiver  
Name (1):

Parent/Caregiver  
Name (2):

Address - same as above

Address - same  
as above

Address:

Address:

City:

City:

Postal Code:

Postal Code:

Home Phone:

Home Phone:

Cell Phone:

Cell Phone:

E-mail

E-mail

Preferred  
Communication  
Method:

Preferred  
Communication  
Method:

Primary Contact/  
Substitute Decision  
Maker:

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**Referral Information:**

Referral Source:

If Primary Care or Hospital, is the client being discharged from the Emergency Department or an Inpatient Unit.

Referral Agency  
Name:

Referral Contact  
Name:

Referral Contact  
Number:

Reason for Referral:      Assessment  
   Treatment  
   Groups/Camps  
   Resources/Information

Additional Referral  
Details:

The child/youth at immediate risk of harm.

The child/youth or a parent/guardian in the home at immediate risk of harm by the other parent/guardian.

The child/youth has been involved with the police.

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**Preferred Program/Service:**

Please select the programs and services that you feel are appropriate for the referral. Access and System Navigation will work with you and your client to determine the most appropriate program and service based on assessment of level of need and other inclusion and exclusion criteria.

Preferred Program/  
Service

- Yoga for Youth
- Expressive Arts  
Programs (\$120)
- Dove Confident Being  
Me Group
- Free Being Me Group
- ROCK Crew (\$200)
- March Break Camp -  
On my own two feet  
(\$250)
- Summer Camp (\$300)
- YAY - Social Skills  
Groups
- YAY - Summer Camp  
(\$200)
- YAY - One to One  
Match