

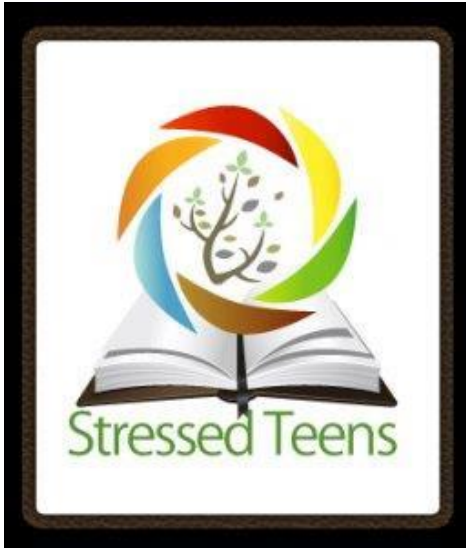


Touchstone Family Association

Strengthening Family • Building Community

STRESSED TEENS

Phone: (604) 279.5599 Fax: (604) 279.1814



Name: _____ M__ F__
 Address: _____
 _____ Postal Code: _____
 Phone: _____ Cell: _____
 Date of Birth: _____ Age: _____
 Today's Date: _____
 Youth lives with: _____
 Youth Attends (school /work): _____
 Parent/Guardian's: _____
 Address (if different): _____
 City: _____ Postal Code: _____

Please check applicable boxes:

Presenting Issues:

<input type="checkbox"/>	Over-achieving	<input type="checkbox"/>	Internalizing Anger	<input type="checkbox"/>	Physical Violence	<input type="checkbox"/>	Cutting/self harm
<input type="checkbox"/>	Verbal Outbursts	<input type="checkbox"/>	Withdrawing	<input type="checkbox"/>	Threatening Behaviours	<input type="checkbox"/>	Gang Related Activities
<input type="checkbox"/>	Anxiety	<input type="checkbox"/>	Bullying	<input type="checkbox"/>	Irregular school attendance	<input type="checkbox"/>	Loss of interest

Where did you hear about this program? _____

Referring professional/Agency Contact Name: _____ Phone: _____

Reason for Referral: _____

Please fax or email: Kelly Gault or Lisa Ward Attention

210-3031 Viking Way – Richmond – BC – V6V 1W4

T: 604.279.5599 F: 604.279.1814

Email: kgault@touchfam.ca; lward@touchfam.ca

Website: www.touchstonefamily.ca