



YOUTH BRANCH

FOOTHILLS CHILDREN'S WELLNESS NETWORK

RESILIENT • CONNECTED • YOUTH ▲



Youth Navigator Referral Form

Fax to 403-652-1721

www.foothillsnetwork.ca

Youth Navigator

Cell: 403-336-9440

Email: youthnavigator@crpcn.ca

Fax in referral form for an appointment or call number above with questions.

Date: _____

Name of person referring: _____

Phone: _____

Fax: _____

Client: _____

DOB: _____ PHN: _____

Parent/Guardian Name if applicable: _____

Address: _____

Phone: _____ Other phone: _____

Diagnosis (if applicable): _____

Other services involved with Family: _____

Reason for Referral: _____

Navigator Summary

Date Referral Received: _____ Initial Contact with Family made: _____