

# PATIENT REFERRAL FORM

If your loved one is struggling with drug or alcohol misuse, you can reach out to Hope House to begin the referral process. Our referral system is designed to help individuals who are ready to overcome addiction and access care as quickly as possible. Through our low-cost treatment programs, our clients develop the healthy coping skills they need for lifelong recovery. And through family therapy, we help our clients and their loved ones rebuild relationships. Contact our team at 410-923-6700 with any questions or fill out the form below to begin your referral.

**Relationship to Referring:**

- Spouse    Parent    Child    Relative    Co-Worker    Friend

**Referring Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Person's Name You Are Referring:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Is there anything else you would like us to know?**

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# PROFESSIONAL REFERRAL FORM

Hope House Treatment Centers partner with professionals who help individuals access care for behavioral health challenges such as substance use disorders, problem gambling and mental health challenges. We work with:

- Healthcare Professionals including other Treatment Programs
- Local Health Departments
- Crisis Intervention Teams
- Legal Professionals
- Homeless Outreach Providers
- Recovery Centers
- Veterans Organizations

We've made treatment for addiction accessible by keeping costs low and by making the admissions process as streamlined as possible. If you have a patient or client who is in need of treatment, contact us at 410-923-6700 or use the form below to begin the referral process.

**Referring Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Person's Name You Are Referring:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Is there anything else you would like us to know?**  
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