THE HOLISTIC HIVE | FIRST FLIGHT

FAMILY & COMMUNITY REFERRAL

FREE for Wicomico County families with children from birth through age 7.

Parents and caregivers may refer themselves. No school or provider referral is needed.

1 HOW ARE YOU CONNECTING WITH US?

- ☐ I am a parent or caregiver referring my family
- ☐ I am a community partner referring a family

2 CHILD & CAREGIVER INFORMATION

Child name

Date of birth

Parent / caregiver name

Relationship to child

Phone number

Email (optional)

Preferred contact: ☐ Call ☐ Text ☐ Email

Wicomico resident? ☐ Yes ☐ No

Preferred language / interpretation needs (optional)

3 WHAT WOULD YOU LIKE SUPPORT WITH? (OPTIONAL)

- ☐ Strengthening connection with my child
- ☐ Understanding behavior or big feelings
- ☐ Routines, transitions, or parenting strategies
- ☐ Child development or learning concerns
- ☐ Family stress or life changes
- ☐ Finding helpful community resources
- ☐ Learning more about First Flight
- ☐ Other

Anything else you would like us to know? (optional; no detailed personal history needed)

4 CONTACT PERMISSION & OPTIONAL REFERRER INFORMATION

- ☐ I am the caregiver, or I have the caregiver's permission to request contact.

Referring organization (if applicable)

Referring staff / contact (if applicable)

This request is not enrollment or consent to services. Our team will contact the family to discuss First Flight, confirm eligibility, and explain next steps.

SEND COMPLETED FORM TO: info@the-holistic-hive.com

The Holistic Hive | 410-205-9177 | www.the-holistic-hive.com