Hope & Joy Therapy

A virtual therapy clinic in British Columbia

hello@hopeandjoytherapy.ca
778-819-1152
Fax: 1 (778) 309-0376
hopeandjoytherapy.ca

REFERRAL FORM

Fillable form — type directly into the fields, then save and email to hello@hopeandjoytherapy.ca or print to fax to 1 (778) 309-0376

REFERRING PRACTITIONER / CLINIC INFORMATION

Practitioner Name: _____ Clinic / Practice Name: _____

Phone: _____ Fax: _____ Date: _____

Email: _____ Signature: _____

PATIENT INFORMATION

Full Name: _____ Date of Birth: _____

Phone: _____ Email: _____

Preferred contact method: ☐ Phone ☐ Email Best time to reach: _____

REASON FOR REFERRAL (CHECK ALL THAT APPLY)

- ☐ Anxiety, burnout & perfectionism
- ☐ Depression
- ☐ Neurodivergence & chronic health / stress
- ☐ The immigrant experience
- ☐ Families, parenting, youth & children
- ☐ Relationships & couples
- ☐ Life transitions
- ☐ Other: _____

PLEASE NOTE — WE ARE UNABLE TO SUPPORT:

Clients in active crisis or currently suicidal • Active addiction • Active eating disorders
Diagnostic / psychoeducational assessments • Medication prescribing or management

If the patient is currently in crisis, please do not submit this referral.

RELEVANT CLINICAL NOTES (OPTIONAL)

URGENCY

☐ Routine ☐ Urgent — reason: _____

☐ The patient named above has consented to this referral and to Hope & Joy Therapy contacting them directly regarding a free 20-minute consultation to find the right therapist match.

Session fees: Individual $165 | Parent & family $195 | Couples $225 (50 minutes). Insurance receipts provided.
All sessions are virtual. Free 20-minute consultation available to help match patients with the right therapist.