



Referral for Legal Services



ABOUT TEAMCHILD

TeamChild provides free legal services and works directly with young people. Generally, we work with youth between the ages of 12 and 24 who live in King, Pierce, Spokane, or Yakima counties, or young people currently or recently incarcerated in one of the state's Juvenile Rehabilitation (JR) facilities. We prioritize clients who are low-income or would not be able to afford a private attorney.

YOUTH NAME & CONTACT INFORMATION

First name	Last name
Pronouns (she/her, they/them, etc.)	Date of birth
Legal name (if different)	Email address
Phone number	Is it safe to leave a voicemail or text at this number? Yes No

Please describe the best way to contact this young person (calling, texting, hours of the day, etc.) or if there are any safety/privacy considerations when calling this number.

Address where youth lives or has most recently stayed:

Street address	
City	Zip code

REFERRAL SOURCE INFORMATION

If you are an adult referring a young person, please fill in the below information about yourself:

Full name	Title & organization (if applicable)
Phone number	Email address
What is your relationship to the youth you are referring?	Is the young person aware you are making this referral? Yes No

COURT DATE

Please complete this section if youth has a pending court date:

Case number	Court date
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JUVENILE REHABILITATION (JR)

Please complete this section if youth is currently in JR:

Facility name	Cottage (if applicable)	
Case number associated with placement	Sentencing/disposition date	Anticipated release date/CERD

Please complete this section if youth has previously been in JR:

Release date	Case number associated with placement	Is youth on parole? Yes No
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ACCOMMODATIONS & ACCESS

Preferred language	Is an interpreter needed? If so, what language?
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Please describe any access needs, accommodations, or anything we should know when reaching out:

LEGAL NEEDS & REASON FOR REFERRAL