



**Hakeford Woods Forest School CIC**  
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### Wellbeing in Nature Referral Form

Please complete the following form and return it to the above address or by email

<b>Name of client being referred.</b>	
<b>Referring professional's name</b>	
<b>Organisation Name and Address</b>	
<b>Email</b>	
<b>Telephone Numbers</b>	
<b>Will the participant be attending with a support worker?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please give details)
<b>Brief details of referral: Age, reasons for referral, intended outcomes etc</b>	<div style="border: 1px solid black; padding: 5px; margin-top: 10px;">           Specific details are not necessary, just a summary to enable us to consider the needs of the group when planning sessions         </div>
<b>Additional needs/specific issues that we need to consider when preparing risk assessments</b>	
<b>Preferred Start date/days/times (please give all options)</b>	

*This information will not be passed on by Hakeford Woods Forest School CIC, without explicit permission from the person completing the form.*