

Referred By: **Kris Wilcox****Please fill out this form to receive a free resource catalog packet:****Note: All fields marked with a red asterisks are required!**

* **Your Name:** (first, last)

* **Street Address:**

* **City / State / Zip Code:**

* **Phone Number:** ext

E-mail Address:

Teen Name: (first, last)

Teen Info: **Gender:** - Select - **Age:** - Select -

Please describe the event(s) that have led you to seek help*** Please check the box that best describes your situation.**

- ☐ I have a teen that has an immediate need of a school, boot camp or treatment program.
- ☐ I have a teen that possibly needs a school, boot camp or treatment program.
- ☐ I have a teen that may need a school, camp, or treatment in the future.
- ☐ I have a teen who may never need these resources, but I am interested in all options.
- ☐ I'm a teen that would like more information on all options.
- ☐ I do not have a teen, but I am curious about resources for teens.
- ☐ I'm a professional that would like more information.
- ☐ I want the information for a friend or family member.

If you would like immediate help with your troubled teen**Call Toll Free: 1-800-355-8336****Referred By: Kris Wilcox**[Or click here to receive the information online](#)© 2006 <http://specialtyboardingschools.com> - Teen Help, Inc.