風雨蘭 RainLily  
  
個案轉介表 Case Referral Form  
  
 填妥後請電郵至 [safechat@rainlily.org.hk](mailto:safechat@rainlily.org.hk?subject=Case%20Referral%20個案轉介) 或傳真至 2717-1801 並致電 2375-5322 確認。  
Please email completed form to [safechat@rainlily.org.hk](mailto:safechat@rainlily.org.hk?subject=Case%20Referral%20個案轉介) or fax to 2717-1801, then call 2375-5322 to confirm.

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| 轉介日期Date of Referral | |  | |
| 轉介機構Referring Agency | |  | |
| 轉介人姓名及職位Name and Title of Referrer | |  | |
| 聯絡電話Tel no. |  | 傳真Fax no. |  |

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| --- | --- | --- | --- | --- | --- |
| 案主姓名Name of Client | | | |  | |
| 性別 Gender | F | 年齡 Age |  | 電話 Tel no. |  |
| 地址 Address |  | | | | |
| 個案背景及轉介原因 Case Background and Reason of Referral | | | | | |
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