



**Relay**

NEW CLIENT INTAKE PACKET

# Welcome to your ABA services.

This short packet helps us gather everything we need to get your child started — smoothly and without delays. Most families finish it in about 10 minutes.

PREPARED FOR

**[ Your Practice Name ]**

This packet is fully white-labeled — your logo, your colors, your practice name, and your exact intake steps. What you see here is a sample template.

Sample template · Customized to each practice on Relay

## WELCOME

# We're glad you're here

Here's what happens next and what we'll need from you.

Thank you for choosing [ Your Practice Name ] for your child's ABA services. We know starting can feel like a lot of paperwork and waiting — so we've made this as simple as possible. This packet walks you through each step, and our team will keep you updated the whole way.

Please complete the forms in this packet and return them with the documents listed on the checklist. As soon as we have everything, we'll begin verifying your benefits and scheduling your child's assessment.

1

New Lead

2

Intake

3

Eligibility

4

Assessment

5

Authorization

6

Ready to Start

### You'll never wonder where things stand

Our intake system automatically checks in with you if anything is missing and lets our team know exactly when to follow up — so nothing gets lost and your child starts as soon as possible.

## WHAT TO HAVE READY

### Before you begin

- ☐ Insurance card (front & back)
- ☐ Photo ID for parent/guardian
- ☐ Referral or diagnosis paperwork
- ☐ Any prior evaluations (if available)

SECTION A

## Family & child information

Tell us who we'll be working with.

### 1 Child's information

CHILD'S FULL NAME

DATE OF BIRTH

PREFERRED NAME / NICKNAME

GENDER

HOME ADDRESS

### 2 Parent / guardian

FULL NAME

RELATIONSHIP TO CHILD

PHONE NUMBER

EMAIL ADDRESS

BEST WAY & TIME TO REACH YOU

### 3 Insurance

INSURANCE PROVIDER

MEMBER ID

GROUP #

POLICYHOLDER NAME

POLICYHOLDER DATE OF BIRTH

☐ I've attached a photo of the front of the card ☐ I've attached a photo of the back of the card

SECTION B

## Referral & getting started

A little background helps us prepare.

### 4 Referral details

REFERRED BY (NAME / CLINIC)

REFERRING PROVIDER PHONE

DOES YOUR CHILD HAVE A DIAGNOSIS? IF SO, PLEASE NOTE IT AND THE DIAGNOSING PROVIDER.

☐ Diagnostic report attached ☐ Prior evaluations attached ☐ Not yet — we can help

### 5 Availability & goals

WHAT DAYS / TIMES GENERALLY WORK BEST FOR SERVICES?

WHAT ARE YOU HOPING ABA SERVICES WILL HELP WITH? (OPTIONAL)

#### DOCUMENT CHECKLIST

Please return these with your packet

☐

**Insurance card**

Clear photo of front and back

Required

☐

**Parent / guardian photo ID**

Driver's license or state ID

Required

☐

**Diagnostic report**

If your child has an existing diagnosis

If available

☐

**Referral / prescription**

From your pediatrician or referring provider

If required

☐

**Signed consent form**

Section C of this packet

Required



## SECTION C

# Consent to contact & begin intake

So we can move your child's intake forward.

By signing below, I confirm that the information I've provided in this packet is accurate to the best of my knowledge, and I authorize [ Your Practice Name ] to:

- Contact me by phone, email, or text about my child's intake, scheduling, and next steps.
- Verify my insurance benefits for the purpose of beginning services.
- Communicate with my referring provider as needed to coordinate the start of care.

I understand that completing this packet begins the intake process and does not, by itself, guarantee coverage or services. A member of the team will contact me to confirm the next steps.

### This is a sample consent for intake only

Your practice's own consent language, required disclosures, and any additional forms are added and customized during setup. Relay does not replace your clinical, billing, or records systems — it organizes intake and keeps families moving forward.

\_\_\_\_\_  
Parent / guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Relationship to child

### Thank you — you're almost done!

Return this packet however works best for you. Once we receive it, we'll confirm we have everything and begin. If anything is missing, we'll reach out automatically — you don't have to chase us down.