

Community Resource Information

A community resource book is being put together in order to help members find information that they need, such as doctors, hospitals and help lines, or want, such as infant/toddler programs, preschools, and activity/party places. This book will be a working document, which will be updated on an as-needed basis. Additional forms will be available in the Discussion Room.

Please help make this book the best it can possibly be by filling out the following questionnaire (please use additional paper for more recommendations, if necessary) and doing one of the following:

1. Return it to the folder in the Discussion Room labeled 'Community Resource Information'.
2. Mail it to Lisa Schiede, 22 Meadowlark Drive, East Northport, NY 11731.

Thank you for your participation!

Name: _____ Phone: _____

Health Services:

Recommended Pediatrician

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Recommended OB/GYN

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Recommended Primary Care Physician (Family or Internal Medicine)

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

HELP LINE INFORMATION

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

HELP LINE INFORMATION

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Other Services:

Infant and/or Toddler Programs

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Infant and/or Toddler Programs

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Preschool Programs

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Preschool Programs

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Activity/Party Places

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Activity/Party Places

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____

Activity/Party Places

Description: _____ Contact Name: _____

Name: _____ Phone: _____

Address: _____

Website: _____

Reason for Recommendation: _____