Booking and Pre-Mediation Information

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| --- | --- | --- | --- |
|  | **About You** | | **Who do you want to mediate with?** |
| Name: |  | |  |
| Date of Birth: |  | |  |
| Address: |  | |  |
| Postcode: |  | |  |
| Telephone 1: |  | |  |
| Telephone 2 (if available): |  | |  |
| Email: |  | |  |
| Adjustments needed for you to access the service? eg accessibility needs, language (interpreter) |  | |  |
| Solicitor’s name and firm (if you have one): |  | |  |
| What is this person’s relationship to you? (eg ex-wife): | | |  |
| Dates of the relationship | Living together: | |  |
| Marriage / civil partnership: | |  |
| Separation: | |  |
| Divorce: | |  |
|  | | | |
| **If you have children (you can give their names and dates of birth later), please give:** | | | |
|  | Age | | Who they live with |
| 1 |  | |  |
| 2 |  | |  |
| 3 |  | |  |
| 4 |  | |  |
|  |  | |  |
| What do you need to discuss in mediation? (Please delete any that don’t apply) | | Children / Finance and property / End of relationship | |
| Please give brief details: | |  | |
| Are there any court proceedings or orders in place relating to these matters? | | Yes / No | |
| If yes, please give details: | |  | |
| Has there been domestic abuse, or do you have any concerns about mediating? | | Yes / No | |
| Brief details, if appropriate here: | |  | |
|  | |  | |
| If you are referring on behalf of someone else, please give your name, role and contact details: | |  | |

Thank you. Please return to [Rcullen@ofm.org.uk](mailto:Rcullen@ofm.org.uk)