**RELATE MEDIATION LONDON NORTH WEST & HERTFORDSHIRE MID THAMES & BUCKS**

**REFERRAL FORM FOR MEDIATION**

**Tel 0300 003 2324 option 2**

**Email: mediation.ntc@relate.org.uk**

**Website:** [**https://www.relate.org.uk/relate-north-thames-chilterns**](https://www.relate.org.uk/relate-north-thames-chilterns)

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| **CLIENT DETAILS**  PARTNER DETAILS  (Please provide all contact numbers)  Name………………………………………………………………………………… Name……………………………………………………………………………………….....  Address……………………………………………………………….……........ Address……………………………………………………..………………………….……..  ……………………………………………………………………………….………… ………………………………………………………………………………………………..……  Post Code……………………………………………………………………...... Post Code……………………………………………………………..……………………..  Home Tel Number………………………………………………............. Home Tel Number…………………………………………..……………………………  Mobile no…………………………………………................................ Mobile no…………………………………………..…….…………………..……………..  Date of Birth………………………………………………….................... Date of Birth…………………………………………………………….……………………  N.I. Number……………………………………………………................. N.I. Number……………………………………………………………………….………….  Occupation………………………………………………………................ Occupation……………………………………………………..……………………………..  Interpreter required-language…………………………………....... Interpreter required- language……………………………………..……………..  Email address………………………………………………………………….. Email address…………………………………………………………………..……………  Client authorises communication via Email………Yes/No…. Client authorises communication via Email………Yes/No………………. |

**How did you hear about Relate?**

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| **Solicitor or Agency Solicitor or Agency**  Firm…………………………………………………………………………….…… Firm………………………………………………………………………………………………  Address……………………………………………………………………….….. Address……………………………………………………………………….………………..  ………………………………………………………………………………………… …………………………………………………………………………………………….……….  Post Code………………………………………………………………….…….. Post Code………………………………………..………………………………………….…  Tel No…………………………………………………………………….………… Tel No……………………………………………………………………………………..…..…  Email ……………………………………………………………………………….. Email……………………………………………………………………………………………… |

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| **CASE DETAILS**  Please give names, age and residence arrangements of children involved:  **First Name Age M or F? With whom living**  ............................................................................. ……………………………………… ……………………………….……………………………………………………  ............................................................................. ……………………………………… ……………………………….……………………………………………………  ............................................................................. ……………………………………… ……………………………….……………………………………………………  ............................................................................. ……………………………………… ……………………………….……………………………………………………  ............................................................................. ……………………………………… ……………………………….……………………………………………………  ............................................................................. ……………………………………… ……………………………….…………………………………………………… |

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| **Any other relevant information**…………………………………………………………………………………………………………………………………………………………………………………………………… ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
| **Potential areas for Mediation ( please tick)**  child issues **( )** Finance ( ) Property **(** ) Other ( ) Please state**……………………………………..…………..** |