**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**……………………………………..…………..** |