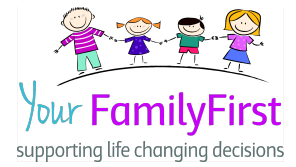


Family Mediation Enquiry Form For use by Solicitors

| | |
|--|---|
| Client 1 name | Client 2 name |
| Address | Address |
| Telephone | Telephone |
| Names and dates of birth of any children | |
| Special needs (if any) | Special needs (if any) |
| Eligible for legal aid? | Eligible for legal aid? |
| Solicitor Name Address Telephone | Solicitor Name Address Telephone |
| Issues the clients wish to consider in mediation | |

Please complete and return this form to



Your Family First, Family Mediation Team

By post - Crombie Wilkinson Solicitors, 19 Clifford Street, York, YO1 9RJ

Fax number – 01904 632329

Email – mediator@yourfamilyfirst.co.uk

