



## MEDIATION CENTRE ENQUIRY FORM

Please complete this booking enquiry form electronically or by hand and return to William Forster Chambers by email: [clerk@williamforster.com](mailto:clerk@williamforster.com) or by fax: (08) 8941 1541. *Compulsory fields are marked with \*.*

Mediation Centre staff will contact you on the phone number provided to confirm availability and complete your booking. Your booking is only tentative until confirmed by phone.

### Details of person making enquiry

\*Name \_\_\_\_\_ Firm \_\_\_\_\_

\*Phone \_\_\_\_\_ Today's date \_\_\_\_\_

### Mediation Information

\*Matter \_\_\_\_\_ Mediator \_\_\_\_\_

\*Date of mediation \_\_\_\_\_ Commencing time \_\_\_\_\_

Number of parties \_\_\_\_\_

Number of conference rooms required:

1 conference room

2 conference rooms

Mediation room only

Mediation room + 1 conference room

Mediation room + 2 conference rooms

Mediation Centre (Mediation room + 2 conference rooms)

Please specify any special requirements \_\_\_\_\_

**Firm #1** Name of firm \_\_\_\_\_

Solicitor \_\_\_\_\_ Barrister \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**Firm #2** Name of firm \_\_\_\_\_

Solicitor \_\_\_\_\_ Barrister \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**Firm #3** Name of firm \_\_\_\_\_

Solicitor \_\_\_\_\_ Barrister \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_