

Mediation Referral Form / Solicitor Referral Form

First Client's Details		
Clients Name:		
Address:		
Post Code:		
Telephone Number:		
Email Address:		
Second Client's Details		
Clients Name:		
Address:		
Post Code:		
Telephone Number:		
Email Address:		
Children's Details		
Child's Name:	D.O.B.:	
Living With:		
Referring Solicitor		
Firm Name:		
Address:		
Post Code:		
Telephone Number:		
Mediation Relating To		
Finances	Children	All Issues
Other Relevant Information		
Special Needs/Disabled Access/Other (please note that it is not necessary to provide any background information as the mediator will gather this information)		

Please send your completed form to Lisa Buckridge, Purcell Solicitors.

✉ lisa@purcellsolicitors.co.uk

☎ +44 (0) 1908 693000

📍 The Stables, Brooklands Farm, Newport Road, Broughton, Milton Keynes, MK16 0HU.