



# Bluewater Mediation

Helping Separating and Divorcing Families

## Client Information Form

Please read and sign the Agreement to mediate before completing this form.

It is important that you complete this form as accurately and fully as possible. This document is confidential and will be seen only by our office personnel.

Please mark clearly any information which you are uncomfortable discussing with your spouse or partner in mediation.

**Today's Date:** \_\_\_\_\_

**How did you find Bluewater Mediation:**

- Referred by Judge? \_\_\_\_\_
- Referred by Lawyer? \_\_\_\_\_
- Website? \_\_\_\_\_
- CanPages? \_\_\_\_\_
- Word-of-Mouth? \_\_\_\_\_
- Other? \_\_\_\_\_

**NAME:** \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell # \_\_\_\_\_

Which number should we call you at? \_\_\_\_\_

Email Address \_\_\_\_\_

OK to email you at this address? \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

Telephone: \_\_\_\_\_ Okay to call work? Yes \_\_\_ No \_\_\_

Annual Income: \_\_\_\_\_

**YOUR LAWYER:** \_\_\_\_\_

Telephone: \_\_\_\_\_

**OTHER PARTY: (former spouse or partner)** \_\_\_\_\_

His/ her age? \_\_\_\_\_ His/her employer? \_\_\_\_\_

His/her annual income? \_\_\_\_\_

Do you have any interest in reconciliation with this person? Yes\_\_ No\_\_

Are there any legal reasons that prevent you from communicating directly or indirectly with this person?

\_\_\_\_\_  
\_\_\_\_\_

**Did you and the other party ever live together?** Yes \_\_\_ No \_\_\_

When did you begin living together? \_\_\_\_\_

What was your date of marriage? (if married) \_\_\_\_\_

When did you last separate? \_\_\_\_\_

**YOUR CHILDREN with this former spouse/partner:**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

**Do you have other children? If so:**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Living with: \_\_\_\_\_



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**Have you or the other party started Court proceedings?**      Yes    \_\_\_    No    \_\_\_

If so, what stage are those proceedings at? \_\_\_\_\_

When is the next Court date? \_\_\_\_\_

Approximately how much have you spent to date on legal proceedings? \_\_\_\_\_

**What do you consider to be the biggest obstacle towards reaching agreement in this mediation with your former spouse/partner?**

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**Have the police ever been involved with your family? If so, why?**

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**Are you afraid of your former spouse/partner? If so, why?**

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