TRAINING REGISTRATION FORM



Nebraska Mediation Association
P.O. Box 427 • Scottsbluff NE 69363-0427

info@nemediation.org

Name:	Date:				
Company/Organization:					
Street Address:					
City:				Zip:	
Telephone:		Email:			
Profession/Occupation (optional):					
If affiliated with a Nebraska Mediation	on Center, please	indicate:			
☐ Mediation West	☐ Central	Mediation Center		Concord Mediation Cente	r
☐ The Mediation Center	□ Nebras	ka Mediation Cente	er 🗆	The Resolution Center	
Membership ☐ Individual: \$50 ☐ Organizational (up to 3 membership) ☐ Additional Organizational Membership ☐ Additional Organizational Membership ☐ Basic Mediation Training Please ☐ Individual Registration: \$625 ☐ Registration of 2 or more und ☐ Registration of 3 or more with ☐ Basic Mediation Bridge Training ☐ \$99 per person	mbers: \$40 ea. indicate the sess. per person ler an Organizatio h Individual Mem	onal Membership: \$ berships: \$595 ea.	595 ea.		
Please give the details of your basic t	training (trainer/d	organization, date o	of training):		
Do you plan to apply for an ODR waiv	ver for becoming	a Parenting Act-app	proved mediato	or? □Yes □No □M	aybe
Family Mediation Training Pleas	se indicate the se	ssion you'd like to a	ttend:		
☐ \$850 per person If you are registering for Family Medi	iation Training h	asic mediation train	ing is a prereg	uicito	
1. If you are seeking to become a l	_				
course approved by the Office of					
☐ Nebraska Mediation Associa	•		ton Law/Werr		
☐ University of Nebraska Colle	ge of Law	☐ UNO v	with instructor	Cindy Tierney	
☐ Creighton's Negotiation and		-			
☐ Other training with NMA Brid			_	Resolution	
Date(s) you completed the above tr	-				
2. Basic Mediation Training approv			all other cases.	. Please give the details of y	our
training below (trainer/organiza			submitted for	annroyal by the lead trainer	