| **Personal Information**  |  | **Please make any necessary changes** |
| --- | --- | --- |
|  |  |
| Last Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | First Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |
| City: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Municipality: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Zip: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | (e.g. township, borough) |  |  |
| Home phone: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |
| Mobile Phone: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | E-mail: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| **The best way to contact me is**: (*circle one or two*)  | Home Phone Mobile Phone E-mail (work) E-mail (personal) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Type of Membership:\*** | **Tax deductible donation:** | ***\*Please make checks payable to: NDS******\*Membership donations can also be made through PayPal on our website*** [**www.neighborhooddisputesettlement.org**](http://www.neighborhooddisputesettlement.org)  |
| Bronze | \_\_\_\_\_ $25.00-$35.00 | \_\_\_\_\_$250.00 Diamond |
| Silver | \_\_\_\_\_ $50.00-$75.00 | \_\_\_\_\_$500.00 Platinum |
| Gold | \_\_\_\_\_ $100.00 | \_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |
| **Areas of Interest in Mediation**  |  |  |  |  |
| *(check all that apply):* |  |  |  |  |
| \_\_\_\_Neighborhood | \_\_\_\_\_Landlord/Tenant | \_\_\_\_ Youth |
| \_\_\_\_Labor/Business/Civil | \_\_\_\_\_Custody | \_\_\_\_ Other:(specify) |
| \_\_\_\_Groups/Organizations | \_\_\_\_\_Divorce |  |  |  |
| \_\_\_\_ Elder |  | \_\_\_\_ Property |  |  |  |
|  |  |  |  |  |  |
| **Continuing Education/Training** *(Other than NDS Trainings)* |  |  |  |  |
| Date | Type of Training | No. of Hours | Trainer/Training Center |  |
|  |  |  |  |  |
|  |  |  |  |  |
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| **NDS Training Opportunities** |  |  |  |  |  |  |
| *I would like to see the following topics covered in future NDS trainings:*  |  |  |  |
|  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |
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***Send membership form to:***

2001 N. Front Street, Building 1, Suite 211, Harrisburg, PA 17102

or

email to

staffnds@gmail.com