

Neighborhood Dispute Settlement

Membership Form 2022

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:*

Bronze _____ \$25.00-\$35.00
Silver _____ \$50.00-\$75.00
Gold _____ \$100.00

Tax deductible donation: *Please make checks payable to: NDS

_____ \$250.00 Diamond
_____ \$500.00 Platinum
_____ \$ _____

**Membership donations can also be made through PayPal on our website*

www.neighborhooddisputesettlement.org

Areas of Interest in Mediation

(check all that apply):

| | | |
|---|--|--|
| <input type="checkbox"/> Neighborhood | <input type="checkbox"/> Landlord/Tenant | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Labor/Business/Civil | <input type="checkbox"/> Custody | <input type="checkbox"/> Other:(specify) |
| <input type="checkbox"/> Groups/Organizations | <input type="checkbox"/> Divorce | |
| <input type="checkbox"/> Elder | <input type="checkbox"/> 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:

SEND MEMBERSHIP FORM TO:

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

or

email to

staffnds@gmail.com