



Community Mediation Program Agreement to Mediate

Please read, sign and return this form for your mediation

1. **Mediation Process:** Community Mediation is an informal way for individuals to resolve their conflict and disputes together and not to lay blame on either Participant. The Participants, with the assistance of the mediator, identify issues for discussion and explore possible resolution options during the mediation session. The mediation process requires open and honest communication in order to succeed.
2. **Role of the Mediators:** Mediators are trained and skilled to promote constructive communication and problem solving. Mediators do not provide legal services or advice, nor do they impose any resolution on the Participants. It is not the role of the mediator to express who is right or wrong, rather the mediator will help the Participants work toward an agreement acceptable and fair to one another.
3. **Role of the Parties:** The parties agree to participate in the mediation session in good faith. All parties must agree on who will be present in the mediation session prior to the beginning of the session.
4. **Confidentiality:** The Mediation Procedures Act protects the confidentiality of all mediation communications. Chapter 11 NMSA (2007 Supp). The Participants agree only to use information shared during the mediation towards collaborative problem solving and not to talk about what was said during the mediation session. Except as otherwise provided in the Mediation Procedures Act, or by applicable judicial court rules, all mediation communications are confidential, and not subject to disclosure and shall not be used as evidence in any proceeding.

Any agreement reached through mediation must be mutually acceptable and signed by each Participant. A written record of the mediation signed by all Participants is not confidential and is binding and enforceable. The Participants take their written record with them after the mediation. The Community Mediation Program is not responsible for keeping a copy.

5. **Voluntary:** Each Participant is welcome to stop the mediation process at any time and bring concerns about mediator(s) and/or the process to the ADR Office. Participants can also request another mediation meeting.

My signature below indicates that I have carefully read, and understand, this agreement, and I will comply with the terms of this Agreement to Mediate.

_____ Date

_____ Date

_____ Date

_____ Date