Ku'ikahi Mediation Center
101 AUPUNI ST., SUITE 1014B2, HILO, HAWAI'I 96720
808-935-7844, Fax 961-9727 info@kuikahi-mediation.org

REGISTRATION FOR DOMESTIC MEDIATOR TRAINING

March 26, 27, 28, 2010 ● KTA Puainako (upstairs conference room).
9 am – 5pm Fri/Sat & 9 am – 1 Pm Sun.

(Prerequisite is basic mediation training)

Name _____

Mailing address _____

City/town _____ Zip _____

Phone _____ Cell _____

Email address _____

Please check the appropriate box:

❑ Regular enrollment $100. My Basic Mediation Training was completed on:

Month/Year:_ _____ Location: _____

❑ Refresher rate $65. My Domestic Mediation Training was completed on:

Month/Year: _____ Location: _____

PAYMENT METHOD:

Amount enclosed: _____ Ck# _____

MC/VISA No. _____

Expiration Date/Cardholder name (if different from above).

_____

Signature _____ Date _____

For more information please contact Ku'ikahi Mediation Center 935-7844 or Catherine Lampton (640-1080, 968-7168)