



FORM 4

CONFIRMATION OF ATTENDANCE AT THE DMDC CENTRE

BETWEEN

-----APPLICANT

AND

-----RESPONDENT

(Tick applicable one)

- the Applicant/Respondent confirms their attendance at the A. D. R. Session Scheduled for

(Day, date and time)

- Applicant/ Respondent (circle one) advise that no confirmation of attention can be given because of a lack of co-operation or lack of Response () from other party.

- My client & I are not available to attend the scheduled A.D.R Session.

- The Session is not proceeding because: (Tick one only)

ñ Parties have opted out and form 6 has been filed()

ñ Adjournment on consent to -----()

ñ Opposed adjournment requested by Applicant/Respondent (Circle one) and

ñ appointment before a dispute resolution Specialist on-----

Dated:

To: The ADR Centre

Applicant's or Respondent's Name

cc: other party

Applicant's or Respondent's Name

Phone Number