

CONTINUATION OF MEMBERSHIP APPLICATION

Payment Information:

___ I am enclosing a check for _____

___ Please charge \$_____ to the following card:

MC/Visa No. _____

Expiration date _____

Name of cardholder: _____

Referred by _____

Additional Information for Roster:

Education Degrees and School:

Occupation:

Type of Mediation Done:

Geographic Area Served:

Attach a list of any mediation training you wish listed in the annual directory (provide title, number of hours, and year taken).



Heartland Mediators Association

P.O. Box 14971

Lenexa, KS 66285

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www.heartlandmediators.org

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P.O. Box 14971
Lenexa, KS 66285



**Heartland
Mediators
Association**

*The association for those interested in the
alternative dispute resolution process*



Heartland Mediators Association Membership Application

What is the Heartland Mediators Association(HMA)?

Organized in 1981, HMA is a not-for-profit organization which brings together mediators in Kansas and Missouri to foster professional development and promote the use of mediation. Membership is also open to individuals interested in and supportive of mediation.

✓ resources for advocacy on behalf of mediation and mediators.

What are the goals of HMA?

HMA is the regional resource for mediators and others involved in alternative dispute resolution, providing:

- ✓ networking opportunities;
- ✓ updates on professional and regulatory developments
- ✓ value-priced educational opportunities, often featuring nationally and internationally known speakers;
- ✓ educational programs approved by the Kansas State Office of Dispute Resolution for continuing mediator education credit;

What are the benefits of membership?

HMA provides each member with:

- ☞ listing in the online membership directory
- ☞ 4-6 newsletters and special information mailings
- ☞ three reduced-cost training sessions annually
- ☞ regional meetings
- ☞ opportunities to participate on committees and task forces addressing mediation topics
- ☞ free peer mediation study groups
- ☞ listing on web site referral list

Name _____

Business Address:

Company _____

Address _____

City/State/Zip _____

Phone _____

Fax _____

Email _____

Home Address:

Address _____

City/State/Zip _____

Phone _____

ANNUAL DUES:

- Individual Membership \$65
- Corporate (Business/Nonprofit)* \$160/3 people for 3 people; additional members \$40 each
- Mediation Volunteers (Full-time) or Retired Mediators \$50
- College Student (Full-time) \$25 must be pursuing ADR course of study
- Charge for being listed on Web site referral list: \$10

** Attach list of additional members with appropriate contact information*

[Continued on back page]