

# Mediation Agreement for Personal Injury Claims

**Date:** [Insert Date]

## **Parties Involved:**

Claimant: [Claimant Name] Claim Number: [Claim Number]

Respondent: [Respondent Name]

## **Agreement to Mediate**

The undersigned parties hereby agree to participate in mediation to resolve the personal injury claim arising from the incident on [Insert Date of Incident].

## **Mediation Details**

**Mediator:** [Mediator Name]

**Date of Mediation:** [Insert Date]

**Location of Mediation:** [Insert Location]

## **Terms of Settlement**

In the event of a settlement, the parties agree to the following terms:

1. [Insert Term 1]
2. [Insert Term 2]
3. [Insert Term 3]

## **Confidentiality**

The parties agree that all discussions and negotiations during the mediation shall be confidential and shall not be disclosed in any legal proceedings.

## **Signature**

The parties hereby agree to the terms outlined in this mediation agreement.

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[Claimant Name, Signature, Date]

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[Respondent Name, Signature, Date]

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[Mediator Name, Signature, Date]