

D S Mediation

Daan Spijer LLB

M: PO Box 909, Mt Eliza Vic 3930

T: 0409 952 403

E: daan.spijer@gmail.com

W: www.DSMediation.com.au



Confidentiality Agreement

In the matter of the **Mediation** between:

_____ and _____ (the **Parties**)

on the _____ day of _____ 20____

at _____

with Mediator Daan Spijer

Name of person present at the mediation (not being a Party) (**Attendee**):

(name of Attendee – please print)

(address of Attendee – please print)

I UNDERTAKE to the Parties to the Mediation that, in exchange for being permitted by them to be present at the Mediation:

1. I will not disclose to anyone any information received by me during the Mediation, unless required by law to make such a disclosure.
2. I will not disclose to anyone involved in the Mediation any information received by me during the Mediation from a Party to the Mediation unless expressly authorised by the disclosing Party to do so.

(signature of Attendee)

_____/_____/20____
(date signed)