

Binding Arbitration Program Consent Form
_____ County

Caption of the Case:

_____ v. _____

Docket No: _____

1. I acknowledge receipt of a copy of the Voluntary Binding Arbitration Program Guidelines which I have read and understand.
2. I consent to having the above captioned case submitted to the panel of and I agree to accept and to be bound irrevocably by the panel's decision.
3. I understand that the panel's decision is binding and that my case is being dismissed with prejudice as soon as I execute this form.
4. I understand that I waive my rights to trial by jury and to all appeals.

Check one:

- I understand that the award of the panel will not be less than \$_____ nor more than \$_____ without interest.
- I understand that there is no "high/low" range and that the award, if any, is in the panel's sole discretion, without interest, unless agreed to in the application and includes the possibility of "no cause for action".

Dated: _____

Plaintiff's Attorney

Plaintiff

Defendant's Attorney

Defendant