



NORTH DADE AREA GROUP REPORT

*** *New Group* ***

DATE: ___/___/___

GROUP INFORMATION

(Submit to Assistant Secretary)

NAME OF GROUP:		<i>CHANGES TO</i> NAME OF GROUP:	
MEETING ADDRESS:		<i>CHANGES TO</i> MEETING ADDRESS:	
MEETING DAY(s):	MEETING TIME(s):	<i>CHANGES TO</i> MEETING DAY(s):	<i>CHANGES TO</i> MEETING TIME(s):
MEETING TYPE(s):		Circle all applicable <i>CHANGES TO</i> Meeting Type(s) for the Group below:	

OPEN	CLOSED	SPEAKER ONLY	SPEAKER DISCUSSION	TOPIC	CHAIR'S CHOICE	VARIOUS
BOOK STUDY	STEP STUDY	STEP MEETING	TRADITIONS/CONCEPTS	ASK IT BASKET	BEGINNERS NEWCOMERS	MEDITATION
CANDLE LIGHT	RELIGIOUS	MEN PREFERRED	WOMEN PREFERRED	GAY/LESBIAN	SPANISH	FRENCH
REFRESHMENTS	SMOKERS	WHEELCHAIR ACESIBLE	NO PROFANITY	OTHER		

GSR'S INFORMATION

(Submit to Assistant Secretary)

GSR's NAME:		<i>CHANGES TO</i> GSR's NAME:	
GSR's ADDRESS:		<i>CHANGES TO</i> GSR's ADDRESS:	
GSR's CITY:		<i>CHANGES TO</i> GSR's CITY:	
GSR's STATE:	GSR's ZIP CODE:	<i>CHANGES TO</i> GSR's STATE:	<i>CHANGES TO</i> GSR's ZIP CODE:
GSR's PHONE NUMBER:		<i>CHANGES TO</i> GSR's PHONE NUMBER:	
GSR's EMAIL:		<i>CHANGES TO</i> GSR's EMAIL:	

GROUP REPORT/ISSUES

(Submit to Outreach Chairman)

SUGGESTION TO AREA

(Submit to Secretary)

Signature: _____