

# South Dade Area Meeting List Changes

**IF YOU ARE A TRUSTED SERVANT OF A NEW GROUP OR OF A GROUP WHOSE INFORMATION IS INCORRECT IN THE MEETING LIST, PLEASE ADD OR CORRECT YOUR INFORMATION ON THIS FORM**

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Group Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Meeting Day: \_\_\_\_\_ Email: \_\_\_\_\_

## MEETING FORMAT

**Entry One:** Closed:  Open:

**Entry Two:** 45-Minute Meeting:  60-Minute Meeting:  75-Minute Meeting:  90-Minute Meeting:

**Entry Three:** English:  Portuguese:  Spanish:  \_\_\_\_\_:

**Entry Four:** Gay/Lesbian:  Men Preferred:  Women Preferred:  Youth Oriented:

**Entry Five:** Beginners:  Candlelight:  Meditation:  Old-timers:

**Entry Six:** Ask the Basket:  Basic Text Study:  Chair's Choice:  Concepts Study:   
 Discussion:  Format Varies:  IP Study:  It Works Book Study:   
 Just for Today:  Question & Answer:  Round Robin:  Speaker:   
 Step 10 Inventory:  Steps:  Steps 1-2-3:  Steps/Traditions:   
 Step Guide Study:  Topic:  Traditions:  \_\_\_\_\_:

**Entry Seven:** Handicap Access:  Hearing Impaired:  Smoking Allowed:  No Smoking :   
 Children Welcome:  No Children:  New Meeting:  Mtg Needs Support :

## OTHER MEETING CHANGES

Change:	New Information:
Name: <input type="checkbox"/>	To: _____
Location: <input type="checkbox"/>	To: _____
Day: <input type="checkbox"/>	To: _____
Time: <input type="checkbox"/>	To: _____

**DO NOT WRITE BELOW THIS LINE**

Received: \_\_\_\_\_ Updated: \_\_\_\_\_