

Meeting List / Group Information Form

Please furnish ALL information requested. Incomplete forms cannot be processed.

All personal information will be kept strictly confidential.

Deadline for submitting this form is Feb 28th for April printing and Aug 31st for October printing.

Today's Date	
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✓ Check ALL that apply

<input type="checkbox"/> Yearly Update	<input type="checkbox"/> New Group	<input type="checkbox"/> Format Change	<input type="checkbox"/> Address Change	<input type="checkbox"/> Add Meeting
<input type="checkbox"/> Contact Update	<input type="checkbox"/> Group Name Change	<input type="checkbox"/> Time Change	<input type="checkbox"/> Handicap Access	<input type="checkbox"/> Remove Meeting
<input type="checkbox"/> Online Meeting	<input type="checkbox"/> Remove Group	<input type="checkbox"/> Day Change	<input type="checkbox"/> Special Instructions	<input type="checkbox"/> COVID Reopened

Group Information	
This is the mailing address for your group, not meeting address.	
If you are only updating your contact with the SIA office then please only fill in this box.	
Group Name	
Mailing Address	
City	Zip
Contact information below will be used to verify the information on this form.	
Contact Person	Phone
E-mail Address	

• OLD Listing – AS LISTED on the current meeting list – NEW Groups Leave Blank

Group Name							
Meeting Place Name							
Meeting Place Address							
Meeting Place City					Meeting Place Zip		
Special Instructions							
Online Meeting ID		ID:		Passcode:		Dial-in:	
		URL:					
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	

• NEW Listing – This is what will be listed on the printed list.

Proper meeting place address is imperative, if you do not know the entire address please ask your meeting place for their street address.						Effective Date		
Group Name								
Meeting Place Name								
Meeting Place Address								
Meeting Place City						Meeting Place Zip		
Special Instructions								
Online Meeting ID		ID:		Passcode:		Dial-in:		
		URL:						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		

Abbreviations: ONL=Online; HY=Hybrid; O=Open; OD=Open Discussion; CD=Closed Discussion; C=Closed; S=Step; T=Tradition; BB=Big Book; B=Beginners; M=Men's Meeting; W=Women's Meeting; YP=Young People; LGBT= Lesbian, Gay, Bisexual, Transgender; ABSIT=As Bill See It; CAN=Candlelight; DR=Daily Reflections; GV=Grapevine; MED=Meditation; LIT=Literature; LS=Living Sober; TOP=Topic; SA=Secular; ASL=Sign Lang Avail; SP=Spanish; Noon=Noon; Midnight=Midnight; AM must be indicated; All meetings listed as Non-smoking; No Restricted meetings are listed.

FAX COMPLETED FORM TO: 631-654-1110

E-MAIL COMPLETED FORM TO: meetings@suffolkny-aa.org

MAIL COMPLETED FORM TO: Suffolk Intergroup Association, PO Box 659, Patchogue, NY 11772

OFFICE USE ONLY

Received By:	Meeting List Chair	Web Chair	Corresponding Secretary
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