

# Group Registration / Update Form

All information is **required**, unless otherwise noted as optional (Please print clearly)

Today's Date: \_\_\_\_\_

Pick One:

New Group: \_\_\_\_\_ / Existing Group Update: \_\_\_\_\_ / Remove Group from Meeting List: \_\_\_\_\_

Meeting Name: \_\_\_\_\_

This group was formed (month/year) (optional): \_\_\_\_\_

Area Service Committee: \_\_\_\_\_

Group Contact (optional): \_\_\_\_\_

Group Contact Phone#/Email (optional): \_\_\_\_\_

GPRNA Meeting List Contact:  
[meetinglist@naworks.org](mailto:meetinglist@naworks.org)

EPARNA Meeting List Contact:  
[administrator@eparna.org](mailto:administrator@eparna.org)

## **Meeting Information**

Meets on what Day(s): \_\_\_\_\_

Meeting Start Time: \_\_\_\_\_ AM \_\_\_\_\_ PM

Meeting Length (check one):

\_\_\_\_\_ 1 Hour \_\_\_\_\_ 1-1/4 Hours \_\_\_\_\_ 1-1/2 hours \_\_\_\_\_ 2 Hours \_\_\_\_\_ Other (specify): \_\_\_\_\_

## **Format**

Week 1: \_\_\_\_\_ / Week 2: \_\_\_\_\_ / Week 3: \_\_\_\_\_ / Week 4: \_\_\_\_\_ / Week 5 : \_\_\_\_\_

Please fill in each weeks format using one of the following codes:

**BEG** = Beginners    **BT** = Basic Text    **VAR** = Chairperson Choice    **CAN** = Candlelight    **CPT** = Concepts  
**DISC** = Discussion    **IP** = Informational Pamphlet    **IW** = It Works    **JFT** = Just For Today  
**LC** = Living Clean    **LIT** = Literature    **MED** = Meditation    **QA** = Questions & Answers    **TOP** = Topic  
**TRAD** = Tradition    **STEP** = Step    **SPK** = Speaker Discussion    **SWG** = Step Working Guide

Special Interest: \_\_\_\_\_

**OH** = Open Holidays    **CH** = Closed Holidays    **GL** = LBGT    **M** = Men    **W** = Women    **Y** = Young People  
**BL** = Bilingual    **CW** = Children Welcome    **RA** = Restricted Access    **SMOK** = Smoking

Wheelchair Accessible (Yes or No): \_\_\_\_\_

Closed Meeting: \_\_\_\_\_ OR Open Meeting: \_\_\_\_\_

## **Meeting Location**

Place / Building Name: \_\_\_\_\_

Room Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

County or City Sub-Section: \_\_\_\_\_

Special Instructions for meeting location (i.e. "Enter on Main St. through glass doors.") (optional):  
\_\_\_\_\_

This form can be used for  
GPRNA & EPARNA Meetings

If possible, check the regional meeting list on  
the regional websites to confirm your meeting  
information has not already been updated.

Greater Philadelphia Region:  
[www.naworks.org](http://www.naworks.org)

Eastern PA Region:  
[www.eparna.org](http://www.eparna.org)