

Name: _____

Meeting Name/type: _____ Date: _____

Chairman's name: _____ Speaker's Name: _____

Arrival Time: _____ Departure Time: _____

Is this your home group? Yes _____ No _____

Topic and Chairperson's remarks or Speaker's message: _____

What did I learn at this meeting? _____

How does this apply to my recovery? _____

Sponsor's name: _____ Number of times I talked with my sponsor this week. ____

Sponsor's Phone Number: _____ Can we call your Sponsor? Yes _____ No _____