DATE: _____

When & Where Meeting Update Form

Name of Group:_____ Area:_____

Address:_____

City:_____ State:_____ Zip:_____

Church or Landmark:_____

Contact Name:_____ Phone:_____

Special Instructions/Comments: _____

_____

List of Meetings:

DAY	TIME	MEETING Type	Type of Change
Of the Week	EX: 7:00 PM	O, C, D, Beg, M, L etc.	(New, Change, Delete)
If more space is required, please use the back of this form. THANK YOU			

(updated 05/21/2018)

Please return this form to the Intergroup office by dropping it off at 3128 Beach Blvd, Jacksonville 32207, by fax at 904 399-8537 or by email at neflintergroup@gmail.com. If you need help filling this form out or have any questions, please feel free to call the Intergroup office at 904 399-8535, Monday through Friday from 9 a.m. to 5 p.m. or on the first Saturday of the month from 1 p.m. to 4 p.m.