

Date Submitted:

Submitted To:

Date Update Takes Effect:

Your Name, Telephone # & Position:



Stanislaus Valley Groups of Narcotics Anonymous®
 P.O. Box 578551
 Modesto, CA 95357
 www.svgna.org



Please review your meeting information on the Meeting Directory.

*Fill in blanks on this form **ONLY** if you need changes made on the Meeting Directory or on the Website for your meeting information.*

**Meeting Schedule Information Changes
 (ONLY FILL IN INFORMATION THAT NEEDS TO BE CHANGED!)**

Meeting Information Needed:	OLD Meeting Information	NEW Meeting Information
Name of Group:		
Day & Time Group Meets:		
Name of Place & Address Where Group Meets:		

Use the information below, mark the correct format(s) to ensure that your meeting has the correct information and code applied.

Meeting Format Code Key -	<input type="checkbox"/> BM = Birthday Meeting	<input type="checkbox"/> BS = Book Study	<input type="checkbox"/> C = Closed, Addicts Only	<input type="checkbox"/> KT = Key Tag Meeting
	<input type="checkbox"/> CL = Candlelight Meeting	<input type="checkbox"/> CW = Children Welcome	<input type="checkbox"/> IP = Information Pamphlet	<input type="checkbox"/> MM = Men's Meeting
	<input type="checkbox"/> NW = No Wheelchair	<input type="checkbox"/> PS = Personal Stories	<input type="checkbox"/> QA = Questions & Answers	<input type="checkbox"/> RL = Revolving Literature
	<input type="checkbox"/> S = Smoking	<input type="checkbox"/> SP = Speaker Meeting	<input type="checkbox"/> SS = Step Study	<input type="checkbox"/> WM = Women's Meeting
	<input type="checkbox"/> NV = No Mtg. Verification	<input type="checkbox"/> NC = No Children Allowed	<input type="checkbox"/> O = Open, Non-Addicts Welcome	<input type="checkbox"/> NCW = Newcomer Workshop
	<input type="checkbox"/> SPT = Spiritual Principles Topic	<input type="checkbox"/>		

Return completed form to the Webservant at the monthly ASC meeting.