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| **Anchorage Alaska Intergroup of Overeaters Anonymous**  MEETING INFORMATION UPDATE | | | | |
| PLEASE WRITE CLEARLY AND LEGIBLY  Information in this box is required and should reflect current information on the meeting list | | | | |
| **DAY OF THE WEEK** | | DAY OF THE WEEK | **TIME** | TIME |
| **MEETING NAME** | | | **MEETING ZIP CODE** | **WSO MEETING CODE** |
| MEETING NAME | | | MEETING ZIP CODE | WSO MEETING CODE |
| Please fill in new information for anything that has changed and check what has changed in the box below.  This sheet must be filled out each time a change is made to any meeting location, day, time, and/or service position | | | | |
| **MEETING ADDRESS** | Meeting Address | | | |
| **SPECIFIC LOCATION** | Specific Location | | | |
| **MEETING EMPHASIS CODE (See below)** | | | Meeting Emphasis Code | |
| **MEETING CONTACT NAME** | | | | **INFO CHANGES** |
| **MEETING CONTACT NAME** | | | | **Please check what information changes are being submitted** |
| **TELEPHONE NUMBER** | | | |  |
| **TELEPHONE NUMBER** | | | |  |
| **E-MAIL ADDRESS** | | | | **These changes should be noted in this box** |
| **E-MAIL ADDRESS** | | | |  |
| As the meeting contact person, this fellow has agreed to have their name and phone number listed on the AAI and WSO websites, and the paper versions, of the meeting directories. | | | | Day of the week \* |
|  | | | | Day of the week |
| **Meeting Officers (for internal Intergroup use only – Not public)** | | | | Time(s) \* |
| **Term Starts** | | Term Starts |  | Time(s) |
| **Term Ends** | | Term Ends |  | Address \* |
| **Group Representative Name** | | Group Representative Name | | Specific Location |
| **Representative’s Email** | | Representative’s Email | | Emphasis Codes |
| **Representative’s Phone** | | Representative’s Phone | | Meeting Contact |
| **Secretary’s Name** | | Secretary’s Name | | Officers |
| **Secretary’s Email** | | Secretary’s Email | | OFFICE USE ONLY |
| **Secretary’s Phone** | | Secretary’s Phone | | DATABASE |
| **Treasurer’s Name** | | Treasurer’s Name | | WSO |
| **Treasurer’s Email** | | Treasurer’s Email | | DATE RECEIVED |
| **Treasurer’s Phone** | | Treasurer’s Phone | | DATE RECEIVED |
|  | |  | | DATE ENTERED |
|  | |  | | DATE ENTERED |
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