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| **Anchorage Alaska Intergroup of Overeaters Anonymous**MEETING INFORMATION UPDATE |
| PLEASE WRITE CLEARLY AND LEGIBLYInformation 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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