

# Meeting List Information For New Groups

(circle one)

Meeting Location:

In-Person, Virtual or Hybrid

Day Of Week	Time	Meeting Format (Step, Speaker, Big Book, Etc)	Open or Closed?	Men, Women or ALL	Handicapped Accessible?

If your group has changes to your meeting schedule, please contact:  
[meetingchange@capeatlanticaa.org](mailto:meetingchange@capeatlanticaa.org) .

OR fill out form on the Cape Atlantic Intergroup website under Meetings at:  
[www.capeatlanticaa.org](http://www.capeatlanticaa.org).

## NOTICE OF GROUP MEMBERSHIP

This is to acknowledge that our group conscience has been informed regarding the **Articles of Incorporation and the By-Laws** of Cape Atlantic Intergroup and that the decision of our informed group conscience is to become a member group of Cape Atlantic Intergroup. Our group agrees to be listed as a group willing to participate in, receive service from and accept responsibility for maintenance of Cape Atlantic Intergroup.

In accordance with **Articles IV and V of the Cape Atlantic Intergroup By-Laws**, we therefore assign the group member(s) named herein as our Representative and Alternate Representative until the Cape Atlantic Intergroup Chairperson, Recording Secretary, or Corresponding Secretary is otherwise notified.

DATE: \_\_\_\_\_

Group Chairperson: \_\_\_\_\_ Email: \_\_\_\_\_

Group Secretary: \_\_\_\_\_ Email: \_\_\_\_\_

Intergroup Rep: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate Intergroup Rep: \_\_\_\_\_ Email: \_\_\_\_\_