

HISTORY AND ARCHIVES COMMITTEE – AREA 44

Group History Form

Date Prepared: _____

By Whom: _____ **Sober Date:** _____

Group Name:	
Date Founded;	
Previous Name (If any):	
Early Members/Officers:	
Location of First Meeting:	
Time and Length of Meeting:	
Type of Meeting (Big Book, Step):	
Current Meetings (How Often):	
Present Membership:	
Approximate Number Attending:	
Did the Group ever move? If so, When/Why/Where?	
Is the group registered with G.S.O. NY?	
Did your group experience growing pains and how were they handled/	If necessary, describe on a separate sheet
Please have any long timers in your group add their group memory sheets to this document or add additional sheets. Types of meetings that were held, any names that you remember, references to Bill, Lois or Bob?	

INFORMATION REQUESTED: Group histories can include such things as **anniversaries, special meetings (such as group inventories) outside speakers, visits by other group members from out of town, the group's relationship in the community,** etc.

- Does the Group participate and support the local Intergroup office?
- Do you have an Intergroup Representative? Earliest memories of your home group? Long timers that you remember?
- Does your Group elect a GSR (General Service Representative)? Does your group participate in the Area Assembly and voice your Group's concerns about group needs?

All information provided here is very important to the history of our northern NJ, so please include all information that you can.

Your group can keep a copy- and a copy will be kept in the archives of Area 44, North Jersey.

You can include any additional information about this home group that you find helpful on a separate sheet.

Please return the completed form and all paperwork attached via email to:
archives-chair@njarea44.org