

# NRSCNA

NEBRASKA REGIONAL SERVICE COMMITTEE OF NARCOTICS ANONYMOUS  
New Group Registration/Update Form

Group Name: \_\_\_\_\_ Group Code: \_\_\_\_\_

This group was formed (month/year): \_\_\_\_\_ Today's Date: \_\_\_\_\_

Area Service Committee: \_\_\_\_\_

Regional Service Committee: \_\_\_\_\_

Group Contact: \_\_\_\_\_ **GSR/Alt GSR RCM Other**

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Group's Meeting Information

Meeting Days:	Mon	Tues	Wed	Thur	Fri	Sat	Sun
Meeting Time							
Meeting Length							
Format *							
Open/Closed**							
Handicap Accessible							
Other ***							

\*Format: Basic Text, It Works: How & Why, Step Study, Speaker etc

\*\*Open - open to anyone interested in Narcotics Anonymous Closed - for addicts only

\*\*\* Other: Men's, Women's, Spanish, Candlelight, etc

### Meeting Location

Old (if update)

New

Place/Building Name	Old (if update)	New
Special Directions (which entrance, basement, etc)		
Address		
City		
State		

Mail this form to: NRSCNA; P O Box 68501; Lincoln NE 68501 e-mail to: info@nebraskana.org