

12-STEP RECOVERY GROUP ATTENDANCE REPORTS

1. NAME: _____

DATE: _____ **TIME:** _____ **DAY:** _____

PLACE: _____

Meeting type: AA ____ NA ____

- **Major issue discussed at the meeting:** _____

- **Please describe the most important thing(s) you have learned as a result of this meeting:** _____

- **Please describe your reaction to this meeting:** _____

In order to be valid, this sheet must be signed by the chairperson of the meeting. TO THE SIGNER, THANK YOU FOR HELPING THIS INDIVIDUAL WITH RECOVERY. IN ORDER TO PROTECT YOUR ANONYMITY, YOU NEED SIGN ONLY YOUR FIRST NAME AND LAST INITIAL.

First Name: _____ **Signature:** _____ **Date:** _____

2. NAME: _____

DATE: _____ **TIME:** _____ **DAY:** _____

PLACE: _____

Meeting type: AA ____ NA ____

- **Major issue discussed at the meeting:** _____

- **Please describe the most important thing(s) you have learned as a result of this meeting:** _____

- **Please describe your reaction to this meeting:** _____

In order to be valid, this sheet must be signed by the chairperson of the meeting. TO THE SIGNER, THANK YOU FOR HELPING THIS INDIVIDUAL WITH RECOVERY. IN ORDER TO PROTECT YOUR ANONYMITY, YOU NEED SIGN ONLY YOUR FIRST NAME AND LAST INITIAL.

First Name: _____ **Signature:** _____ **Date:** _____

DATE: _____