

DISTRICT 28 AA GROUP HISTORY QUESTIONNAIRE

Name of Group: \_\_\_\_\_ Group #: \_\_\_\_\_

Date of First Meeting: \_\_\_\_\_

Date Registered With General Service Office: \_\_\_\_\_

Current Meeting Information:

Meeting Location: \_\_\_\_\_

Days Group Meets: \_\_\_\_\_

Meeting Times: \_\_\_\_\_

Present Number of Members: \_\_\_\_\_

Founding Information:

Founding members names with length of sobriety at founding (if known).

---

---

---

---

---

---

Group History: (How, Where, When, Why group started)

---

---

---

---

---

---

---

---

---

---

---

---

**EARLY MEETING INFORMATION:**

Meeting Location:

---

---

---

---

---

Days Group Met: \_\_\_\_\_

Meeting Times: \_\_\_\_\_

Number of Members: \_\_\_\_\_

How Group Progressed Since The Early Days to Present, Including Special events, Projects, Anniversaries, Etc.:

---

---

---

---

---

---

Other Groups Your Members were Instrumental In Starting:

---

---

---

---

---

---