

Inter-Group Association of A.A. of N.Y.

307 7th Ave., (28th St.,) Room 201, New York, N.Y.10001-6007

(212) 647-1680, (914) 949-1200

Deaf (212) 647-1649 TDD Fax: (212) 647-1648

Website: www.nyintergroup.org (includes Meeting List)

E-mail: generalinformation@nyintergroup.org

PUBLIC INFORMATION COMMITTEE VOLUNTEER SPEAKER QUESTIONNAIRE

Submit electronically or mail completed form to the N.Y. Inter-Group office at the address above.

Today's Date: _____

Name _____ May we leave a message? (Check Yes or No)

Email _____ Home Phone _____ Yes ___ No ___

Street _____ Cell Phone _____ Yes ___ No ___

City _____ Work Phone _____ Yes ___ No ___

State ___ Zip Code _____ County _____ Occupation (Optional) _____

Sobriety Date _____ Home Group Name _____

In which age group are you?

Under 20 ___ 20-29 ___ 30-39 ___ 40-49 ___ 50-60 ___ 60 & Over ___

What language do you speak fluently other than English? _____

To which of the following groups would you like to speak?

___ Junior High School Students

___ Religious Groups

___ Senior High School Students

___ Service/Civic Groups

___ College Students

___ Business Groups

___ Graduate Students

___ Senior Citizens' Centers

Are you available for anonymous interviews for T.V., Radio & Print? ___ Yes ___ No

In which geographic area will you speak? Manhattan ___ Brooklyn ___ Bronx ___

Queens ___ Staten Island ___ Westchester ___

When are you most available? (check as many as you wish)

Mon. ___ Tues. ___ Wednes. ___ Thurs. ___ Fri. ___ Sat. ___ Sun. ___

Mornings ___ Afternoons ___ Evenings ___

Can you provide your own transportation? _____