

Accountability/Reunion Group Survey

Name: _____

Are you currently in a group: YES____ NO____

*If YES please provide the following information:

Group Name (if assigned) _____

Current Members _____

Location/Area _____

Are you open to new members? YES___ NO___

Group Style: Male____ Female____ Mixed or Couples_____

Is your group willing to support various areas of need for weekend activities? If so, please provide a contact name and number (or email) so you might be contacted by a board member when a special need arises.

*If NO please list your address, contact number, email and group style preference below:

Please return this form to Nancy LaSuer at 3027 Jenry Dr, Nashville, TN 37214 or NMLasuer@cimplify.net