# Group Information

Group Name: _____

GSR: _____ Date: _____

GSR (A): _____ Rent: _____

Meeting Day: _____ Time: _____

Format: _____ Length: _____

# Meeting Location Information

Location Name:

_____

Address:

_____

Contact Person: _____

Contact Phone: _____

Contact Email: _____

Current Key Holder: _____

Additional Key Holder: _____

Additional Key Holder: _____