

Clean Acres Recovery Housing Meeting Form

Name: _____

Week Dates: _____

Day	Meeting Type:	Location:	Time:	How I Relate to What I Heard:	Signature:
Monday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Tuesday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Wednesday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Thursday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Friday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Saturday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.
Sunday	1.	1.	1.	1.	1.
	2.	2.	2.	2.	2.