

SMALL GROUP ROSTER

Today's Date: _____

INFORMATION ABOUT YOUR GROUP:

- Couples Only
- Women
- Singles Only

- Couples & Singles
- Men
- Other (Please Specify)

Age Range: _____

Day of Week: _____

Frequency: _____

Time: _____

- Open
- Closed
- New

Name	Home #	Address
E-Mail	Work #	City & Zip
Name	Home #	Address
E-Mail	Work #	City & Zip
Name	Home #	Address
E-Mail	Work #	City & Zip
Name	Home #	Address
E-Mail	Work #	City & Zip
Name	Home #	Address
E-Mail	Work #	City & Zip
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E-Mail	Work #	City & Zip
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E-Mail	Work #	City & Zip
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E-Mail	Work #	City & Zip
Name	Home #	Address
E-Mail	Work #	City & Zip

You may use the other side if necessary