



Area 59

EASTERN PENNSYLVANIA
GENERAL SERVICE ASSEMBLY
www.area59aa.org

Pre-Release Contact/Bridging The Gap

For those AA members willing to be temporary contacts.

Male _____ Female _____

Name: _____

Address (Optional) _____

City (Required) _____ Zip Code _____

Phone _____ Cell Phone _____

(All information will be confidential)

I am willing to serve as a:

(Please check one or both)

- Treatment Facility Contact
 Correctional Facility Contact

We are in need of your help!

Experience has shown that an AA meeting on the first day of release from a prison, jail or institution is one of the most effective tools for maintaining continued sobriety. A solid network of contacts throughout the Eastern Pennsylvania area and in your District will foster a smoother transition for AAs. Help “bridge the gap” between the institution and the outside world for our fellow AA members.

..... anytime, anywhere, anyone.

Please return this form to your GSR or DCM