

INDIVIDUAL CENSUS FORM
(NARCOTICS ANONYMOUS CENSUS)

IMPORTANT: COMPLETION OF THIS FORM IS ESSENTIAL IN PROVIDING PI SERVICES ENSURING THE FUTURE GROWTH OF YOUR GROUP AS WELL AS THAT OF NARCOTICS ANONYMOUS AS A WHOLE.

IF YOU'VE ALREADY FILLED ONE OUT, DON'T FILL OUT ANOTHER ONE!!!

1. SEX: Male _____ Female _____
2. AGE: UNDER 10 _____ 25-30 _____ 41-50 _____
10-15 _____ 31-35 _____ 51-60 _____
16-20 _____ 36-40 _____ 61 & over _____
21-25 _____
3. CLEAN TIME: Under 1 mos. _____ 1-2 yrs. _____
1-3 mos. _____ 2-3 yrs. _____
3-6 mos. _____ 3-4 yrs. _____
9-12 mos. _____ 4-5 yrs. _____
5 yrs. and over (Specify) _____
- *4. a. DRUG(S) OF CHOICE- _____
b. Was your drug of choice: PRESCRIPTION _____ NON-PRESCRIPTION _____

5. HOW DID YOU FIRST LEARN OF NARCOTICS ANONYMOUS?

- A. An NA Member _____
- B. Public Information/Media _____
- C. Friend or Relative _____
- D. Treatment or Detox Center _____
- E. Doctor or Therapist _____
- F. Church or Clergyman _____
- G. Criminal Justice System _____
- H. Other (Specify) _____

*Although, in our recovery, we are not concerned with the specifics of our using, the purpose of this question is to broaden our capabilities in effectively carrying the message of recovery--that we are here for ALL drug addicts.