

One of the more “slippery” places in the journey to sobriety is between the door of the facility and the nearest A.A. group meeting. Some of us can tell you that, even though we heard of A.A., we were too fearful to go.

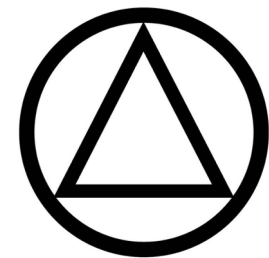
A.A. experience suggests that attending meetings regularly is critical. In order to bridge the gap, A.A. members have volunteered to be temporary contacts and introduce newcomers to Alcoholics Anonymous.

It is suggested that the temporary contact take the newcomer to a variety of A.A. meetings; introduce them to other A.A.’s; insure that they have phone numbers of several A.A. members and share the experience of sponsorship and a home group.

Suggestions for the Temporary Contact

- Make contact with the newcomer while they are still in the facility. To avoid any misunderstandings, explain clearly that this is a TEMPORARY arrangement.
- Experience suggests that it is best to be accompanied by another A.A. member when meeting our newcomer. One of the two temporary contacts should have at least a year of sobriety.
- You may be the first outside member of A.A. the contact meets. As such, you are representing all of us. It is important to be relaxed, friendly and interested.
- Keep the general conversation related to recovery. Avoid discussing the new member’s discharge. We have no opinion on outside issues.
- Take time to introduce your new person to as many A.A. members as possible. Do not, however, push your contact. Some people are very shy.
- Explain sponsorship to the newcomer, referring to the pamphlet “Questions and Answers on Sponsorship” and perhaps help the newcomer find a sponsor.
- Explain group membership and the value of having a home group.
- Be familiar with the paper “Information on Alcoholics Anonymous”, particularly on what A.A. does and does not do.

BRIDGING THE GAP



Temporary Contact Form



Colorado Springs Area Service Office

1353 S. 8th Street

Colorado Springs, CO 80905

Email:

serviceoffice@coloradospringsaa.org

(719) 573-5020

I AM RESPONSIBLE.....

**I AM RESPONSIBLE
WHEN ANYONE
ANYWHERE REACHES
OUT FOR HELP.**

**I WANT THE HAND
OF A.A. ALWAYS TO
BE THERE.**

**AND FOR THAT, I AM
RESPONSIBLE.**

**HELPFUL SUGGESTED
AA PAMPHLETS**

Bridging the Gap GSO P-49

AA at a Glance F-1

Information on AA F-2

Primary Purpose Card F-17

**PLEASE RETURN
THIS FORM
TO:**

**COLORADO SPRINGS AREA
SERVICE OFFICE**

**1353 S. 8th Street #209
Colorado Springs, CO 80905
OR**

email to:

serviceoffice@coloradospringsaa.org

BRIDGE THE GAP VOLUNTEER FORM

NAME: _____
(Corrections requires your full name
if your volunteering to be a Bridger for Corrections)

GENDER: _____ AGE: _____

SOBRIETY DATE: _____

CITY _____ ZIP CODE _____

PRIMARY PHONE: _____

EMAIL: _____

ARE YOU VOLUNTEERING TO BE A

TREATMENT CONTACT: _____

CORRECTIONS CONTACT _____

OR BE A CONTACT FOR BOTH _____