

# Session Dates and Times

Session Name	Date	Time
<b>Session 1:</b> Thinking About Quitting		
<b>Session 2:</b> On the Road to Freedom		
<b>Session 3:</b> Wanting to Quit		
<b>Session 4:</b> Quit Day		
<b>Session 5:</b> Winning Strategies		
<b>Session 6:</b> The New You		
<b>Session 7:</b> Staying Off		
<b>Session 8:</b> Celebration		

Location: \_\_\_\_\_

Facilitator: \_\_\_\_\_

Contact Information: \_\_\_\_\_

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