



ALCOHOLICS ANONYMOUS GROUP INFORMATION CHANGE FORM

GROUP SERVICE No. _____

DATE: _____

DELEGATE AREA No. _____

DISTRICT No. _____

No. OF MEMBERS: _____

OLD INFORMATION

GROUP NAME: _____

Group Meeting Location: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone: _____

MEETING DAY

MON | TUES | WED | THUR | FRI | SAT | SUN

MEETING TIMES

____ | ____ | ____ | ____ | ____ | ____ | ____

GENERAL SERVICE REPRESENTATIVE (G.S.R.)

Name: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone : _____

E-mail: _____

ALTERNATE G.S.R. or MAIL CONTACT (Please check one ✓)

Name: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone : _____

E-mail: _____

NEW INFORMATION

GROUP NAME: _____

Group Meeting Location: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone: _____

MEETING DAY

MON | TUES | WED | THUR | FRI | SAT | SUN

MEETING TIMES

____ | ____ | ____ | ____ | ____ | ____ | ____

GENERAL SERVICE REPRESENTATIVE (G.S.R.)

Name: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone : _____

E-mail: _____

ALTERNATE G.S.R. or MAIL CONTACT (Please check one ✓)

Name: _____

Street: _____

City/Town: _____

State/Province: _____

Zip Code: _____ Telephone : _____

E-mail: _____

If the Group is to be listed in the Directory, please provide a telephone number and mailing address for the G.S.R., Alternate G.S.R., or Group contact. Listing in the Directory is for Twelfth Step referral and/or for meeting information. The G.S.R.'s (or other contact) name and telephone number will be included in the Directory with the group's name and service number.

OK TO LIST IN THE DIRECTORY? Yes No

SIGNATURE: _____

DATE: _____

"Our membership ought to include all who suffer from alcoholism. Hence we may refuse none who wish to recover. Nor ought A.A. Membership ever depend upon money or conformity. Any two or three alcoholics gathered together for sobriety may call themselves an A.A. group, provided that, as a group they have no other affiliation." — Tradition Three (the long form)

"Each Alcoholics Anonymous group ought to be a spiritual entity having but one primary purpose — that of carrying its message to the alcoholic who still suffers." — Tradition Five (the long form)

"Unless there is approximate conformity to A.A.'s Twelve Traditions, the group... can deteriorate and die." — Twelve Steps and Twelve Traditions, page 174.

These are the search parameters that your meeting will be listed by. This allows the alcoholic to search for and find specific meetings that address their needs. If your meeting is held on different days, or has different areas of study, you will need to submit a form for each so the parameters can be set accordingly.

Here is the link for [ADA guidelines for handicap accessible](#). Please read this over before submitting the form, as it is important to be accurate relating to accessibility.

Please check any and all that apply and email to webmaster@district32aa.org

Flags:

Type	Topic	Format	Length	Services	Environment	Specialty
Business			P:B	One Hour		L:OH
Closed			P:C	One and One Half Hour		L:H+
Open			P:O	Varies		L:V
11th Step			T:11	Al-Anon Meeting Also		S:NON
Came To Believe			T:CB	English To French Interpreter		S:EF
Other Topic			T:OT	French To English Interpreter		S:FE
Traditions			T:T	Wheelchair Accessible		S:WA
12 and 12			T:12	Alateen Meeting Also		S:TN
Daily Reflections			T:DR	English To ASL Interpreter		S:ESL
Sponsorship			T:SP	ASL To English Interpreter		S:SLE
Varied			T:V	Wheelchair Accessible Bathroom		S:WAB
ABSI As Bill Sees It			T:AB	Baby Sitter		S:NC
Grapevine			T:GV	English To Spanish Interpreter		S:ES
Step Study			T:SS	Spanish To English Interpreter		S:SE
Big Book			T:BB	Wheelchair Accessible Parking		S:WAP
Legacy			T:L	Children Welcome		E:CW
Steps & Traditions			T:ST	Non-Smoking		E:NS
Book/Literature Study			T:LT	Smoke/Friendship Break		E:B
Living Sober			T:LS	No Children		E:NC
Stories			T:SR	Potluck		E:P
Anniversary/Birthday			F:AB	Smoking		E:SM
Hoot Owl			F:HO	No Court Slips		E:NCS
Spanish			F:SP	Restaurant/Food		E:RS
Bring A Professional			F:BAP	Smoking/Non-Smoking Mixed		E:NSB
New Comer/Beginner			F:NC	Gay & Lesbian		C:GL
Speaker			F:S	War Veteran		C:WV
Candle Light			F:CL	Men's		C:M
Other Foriegn Language			F:FL	Women's		C:W
Discussion			F:D	Native American		C:NA
Podium			F:P	Young Peoples		C:YP
French			F:FR	Senior's		C:S
Public Information			F:PI	Specialty Other		C:O