

Al-Anon Group Record Change Form

For Groups with a Physical Meeting Location

Please submit this form through your Area Group Records Process or to the WSO

1. GROUP RECORD:

WSO ID Number _____

District Number _____

Area Name or Abbreviation _____

2. STATUS:

Change

Inactive

If selecting Inactive, please complete section 8.

3. SUMMARY OF GROUP CHANGES:

Group Name, Mailing Language, Physical Meeting Location, or Email Address

Participants

Phone Contact for the Public Name or Phone Number

Meeting Day, Time, or Other Details

Name, Address, or Phone Number of Group Current Mailing Address

Name, Address, or Phone Number of Group Representative

4. DETAILED GROUP CHANGES:

Please provide detailed group changes below. If the requested information has not changed, leave the section blank.

Group names are visible to members, newcomers, professionals, and the public. They are the first chance a group has to offer help and hope. They reflect Al-Anon principles and are inviting to all. The WSO reviews all proposed group names and reserves the right to delay processing group name changes when meeting names are not in keeping with Al-Anon spiritual principles. Contact your Area Group Records Coordinator or the WSO for further information.

Group Name _____

Mailing Language (Select one) English French Spanish

Meeting Place _____

Meeting Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Group Email _____

PARTICIPANTS This information is **optional**. In keeping with Traditions Three and Five, our groups welcome anyone affected by someone else's drinking. **Every Al-Anon meeting is open to every Al-Anon member.**

Parents of Alcoholics Adult Children Young Adults

People of Color Women Men LGBTQIA+

PHONE CONTACTS FOR THE PUBLIC:

First Name 1 _____ Phone Number 1 _____

First Name 2 _____ Phone Number 2 _____

5. MEETING DETAILS: Day(s) _____

Time _____ AM PM

Families and Friends only Families, Friends and Observers welcome

Meeting Language _____ Member Count _____

These options have changed. Please see Instructions for updated definitions.

Introductory Limited Access Fragrance Free

Handicap Access Child Care Sign Language

Smoking Permitted Beginners

Location Instructions _____

6. CURRENT MAILING ADDRESS:

(WSO mail for the group is sent to the postal and email addresses)

First Name _____ Last Name _____

Street/PO Box _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Phone Number _____ CMA Email _____

7. GROUP REPRESENTATIVE (GR):

Members of Al-Anon who are also members of A.A. do not serve as Group Representatives. "Members honor this policy out of respect for Al-Anon unity and the group conscience process, in accordance with Tradition One and Tradition Two." (*Digest of Al-Anon and Alateen Policies*)

First Name _____ Last Name _____

Street/PO Box _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Phone Number _____ GR Email _____

By registering as an Al-Anon Family Group with Al-Anon Family Group Headquarters, Inc. (AFG, Inc.), a group is granted permission to use the Al-Anon trademarked name and logo without modification for the purposes of Public Outreach as well as AFG, Inc. copyrighted materials for the sole purpose of conducting its meetings. Al-Anon copyrighted materials are limited to:

- Suggested Welcome, Suggested Closing, Suggested Preambles to the Twelve Steps, the Twelve Steps, Twelve Traditions, and Twelve Concepts of Service as they are found in the current version of the *Al-Anon/Alateen Service Manual (P24/27)*, without alteration or modification.

- Conference Approved Literature (CAL) screenshots or printouts, when accompanied by copyright acknowledgment and limited in scope to content possible to be shared and discussed during one meeting.

This permission is granted for as long as the group continues to hold meetings; remains in compliance with AFG, Inc. intellectual property policies and instructions; refrains from distributing or posting permanently, in a public forum, copyrighted materials; and remains an Active registered group with AFG, Inc. These materials may not be modified and permission to use these materials may not be transferred to anyone without prior written approval. The group shall not use the materials in any way that could damage the reputation and goodwill that has been established in the materials.

8. GROUP INACTIVATION: Registered Group Name and/or WSO ID _____

Meeting Day and Time _____ Meeting City and State/Province _____

The WSO will register any group designating itself as an Al-Anon Family Group with the understanding that it will abide by the Traditions and that meetings will be open to any Al-Anon member. (*Digest of Al-Anon and Alateen Policies*)

Submitted by _____ Date _____ Phone _____ Email _____