

NEW GROUP _____

CHANGES TO GRP _____ Please X which applies

AREA 16 ALCOHOLICS ANONYMOUS GROUP INFORMATION RECORD FORM

In accordance with AA's Sixth Tradition, it is suggested that a group not be named after the facility in which it meets.

(* required field)

*GROUP ID NUMBER _____ *DISTRICT/ZONE _____ *EFFECTIVE DATE _____

*GROUP NAME _____

*Address of Meeting Place _____

*Group P. O. Box # _____

*City Where Group Meets _____ Directions to meeting _____

Meeting times: Sun _____ / Mon _____ / Tues _____ / Wed _____ / Thurs _____ / Fri _____ / Sat _____

Closed or Open Meetings _____ # of Members _____

*G.S.R. _____ Phone# _____
(if no GSR, pls enter a contact name) (Please include area code)

Address _____

Email address _____

ALT. G.S.R. _____ Phone# _____
Address _____ (Please include area code)

SECRETARY _____ Phone# _____

TREASURER _____ Phone# _____

GRAPEVINE REP _____ Phone# _____

PICPC REP _____ Phone# _____

INSTITUTIONAL REP _____ Phone# _____

CORRECTIONAL REP _____ Phone# _____

How many copies of the *Georgia Message* for your group? _____

Listing in the Eastern States Directory is for 12 Step Referral and/or requests for meeting information.

The GSR's (or other contact) full name and telephone number will be included with the group's name and service number.

OK TO LIST IN THE DIRECTORY? ____ Yes ____ No

The above information given by: _____ Date: _____

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

"Unless there is approximate conformity to AA's Twelve Traditions, the group ... can deteriorate and die." 12 & 12, page 174

PLEASE SEND TO:

**G.S.S.A
P. O. BOX 68
MACON, GA 31202**

**Phone (478)745-2588
FAX (478)745-0238
gssa@aageorgia.org**