

Alcoholics Anonymous Group Information Change Form

To be forwarded to Area 14 Registrar to make updates to General Service Office records
Please provide as much information as possible

Area	14	Group Service Number		Date	
District		Group Start Date		Number of Members	

Old Group Information	New Group Information
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Name: _____	Name: _____
Loc: _____	Loc: _____
Street: _____	Street: _____
City/St/Zip: _____	City/St/Zip: _____

Meeting Day and Time

	Mon	Tues	Wed	Thur	Fri	Sat	Sun

Old General Service Rep (GSR)	New General Service Rep (GSR)
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Name: _____	Name: _____
Street: _____	Street: _____
City/St/Zip: _____	City/St/Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
	OK to list in A.A. Regional Directory? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Receive Area 14 Minutes by Email? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Receive Area 14 Minutes by USPS? Yes <input type="checkbox"/> No <input type="checkbox"/>

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

Old Alt. GSR or Old Mail Contact	New Alt. GSR <input type="checkbox"/> or New Mail Contact <input type="checkbox"/>
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Name: _____	Name: _____
Street: _____	Street: _____
City/St/Zip: _____	City/St/Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
	OK to list in A.A. Regional Directory? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Receive Area 14 Minutes E-Mail Yes <input type="checkbox"/> No <input type="checkbox"/>
	Receive Area 14 Minutes USPS Yes <input type="checkbox"/> No <input type="checkbox"/>

Signature: _____ **Date:** _____

Return this form to North Florida Registrar:

Registrar
728 West Ave. #148
Cocoa, FL 32927
or email: registrar@aanorthflorida.org