# ALATEEN REGISTRATION/GROUP RECORDS CHANGE FORM

**Alateen Registration/Change forms are submitted to the WSO through your Area process. Please check with your Delegate, District Representative or Alateen Coordinator for information on where to send this form.**

(1) WSO ID. Number ☐☐☐☐☐☐☐☐ District Number ☐☐☐ Area Name ☐☐☐☐ (Abbreviation)

(2) Status ☐ New ☐ Change ☐ Inactive

(3) Changes (Check all that apply) ☐ Current Mailing Address (CMA) ☐ Group Status ☐ Group Name* ☐ Mtg Day ☐ Mtg Time ☐ Mtg Place ☐ Contact ☐ Sponsor ☐ GR

(4) Special Needs ☐ Handicap Access ☐ Limited Access* Note: Alateen meetings are closed meetings

☐ Language Spoken ☐☐☐☐☐☐☐☐ ☐ ☐ Mailing Language ___________________

☐ Special Instructions, i.e. use back door, etc. ____________________________________________

(5) Current Mailing Address: (All WSO mail for the group is sent to this address; please be sure it's a current Sponsor).

Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Street/PO Box ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

City ☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐ State/Province ☐☐☐☐☐☐☐☐☐

Zip/Postal Code ☐☐☐☐☐☐☐ Country ☐☐☐☐☐☐☐☐

Phone Number ☐☐☐-☐☐☐-☐☐☐☐ E-mail ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

(6) Group name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

(7) Meeting Place ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

(8) Meeting Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

City ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ State/Province ☐☐☐☐☐☐☐☐☐

Zip/Postal Code ☐☐☐☐☐☐☐ Country ☐☐☐☐☐☐☐☐

(9) No. of Members ☐☐☐ (10) Day: Su Mo Tu We Th Fr Sa Time: ☐☐:☐☐ AM PM

(11) Contact (if other than Sponsor). Contacts **must** be Al-Anon members involved in Alateen Service

First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone # ☐☐☐-☐☐☐-☐☐☐☐

(12) **GROUP SPONSORS MUST COMPLETE THE AL-ANON MEMBER INVOLVED IN ALATEEN SERVICE (AMIAS) FORM**

**Please list the two primary group Sponsors.**

**Group Sponsor(s) to Add** The WSO ID# will be assigned if new AMIAS

Name (first) ☐☐☐☐☐☐☐☐☐ WSO ID# ☐☐☐☐☐☐☐☐ ☐✓ if Ok to list as a contact

(last) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone # ☐☐☐-☐☐☐-☐☐☐☐

Name (first) ☐☐☐☐☐☐☐☐☐ WSO ID# ☐☐☐☐☐☐☐☐ ☐✓ if Ok to list as a contact

(last) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone # ☐☐☐-☐☐☐-☐☐☐☐

**Group Sponsor(s) to Remove (if CMA for the group, a replacement must be provided in order to process)**

Name (first) ☐☐☐☐☐☐☐☐☐ WSO ID# ☐☐☐☐☐☐☐☐

(last) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Name (first) ☐☐☐☐☐☐☐☐☐ WSO ID# ☐☐☐☐☐☐☐☐

(last) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

## For Area Use

(13) Alateen Group Rep ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Street/PO Box ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

City ☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐ State/Province ☐☐☐☐☐☐☐☐☐

Zip/Postal Code ☐☐☐☐☐☐☐ Country ☐☐☐☐☐☐☐☐

Phone Number ☐☐☐-☐☐☐-☐☐☐☐ E-mail ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

* See *Al-Anon/Alateen Service Manual* (P24/27) for information and/or definitions

Submitted by: __________________ Date: __________ Phone: _______________ E-mail: ______________________