U.S. and a			
U.S. and Canada ALCOHOLIC	CS ANONYMOUS	GROUP INFORMATION CHANGE FORM	
GROUP SERVICE No DELEGATE AREA No.			
DELECTION SERVICE NO.		DATE	
-LEGATE AREA No.	DISTRICT No.	DATENo. OF MEMBERS:	
OLD INFORMATIO	Ŋ	NEW INFORMATION	
GROUP NAME:	GPOU	D NAME:	
Cloup Weeting Lazza	Group	P NAME: Meeting Location:	
		wiceting Location.	
City/Town:		Street: City/Town:	
		Province:	
Zip Code: Telephone:	Zip Cor	de: Telephone:	
		MEETING DAY	
MEETING DAY  O MON O TUES O WED O THUR OFRI OSA	AT O SUN O MON	O TUES O WED O THUR O FRI O SAT O SUN	
MEETING TIMES		MEETING TIMES	
GENERAL SERVICE REPRESENTATIVE (G.	S.R.) GENE	RAL SERVICE REPRESENTATIVE (G.S.R.)	
Name:	Name:		
Street:	Street:		
City/Town:	City/10	own:	
State/Province:	State/F	Province: Telephone:	
Zip Code: Telephone:	Zip Co	ode: l'elephone:	
E-mail:	E-mail	ː	
ALTERNATE G.S.R. O or MAIL CONTACT O (Pie Name:	ase Check one v)	RNATE G.S.R. O or MAIL CONTACT O (Please Check one v)	
Street:	Street		
City/Town:		own:	
State/Province:	State/	Province: Telephone:	
State/Province: Telephone:		ode: l'elepnone:	
E-mail:	E-mai	l:	
If the Group is to be listed in the Directory, please progroup contact. Listing in the Directory is for Twelfth S and telephone number will be included in the Directory OK TO LIST IN THE DIRECTORY? O Yes O No	tep referral and/or for m	er and mailing address for the G.S.R., Alternate G.S.R., or neeting information. The G.S.R.'s (or other contact) name and service number.	
SIGNATURE:		DATE:	
SIGNATURE.	74-70-40 EV 400 EV 1906 EV		
"Our membership ought to include all who suffer from alcoholupon money or conformity. Any two or three alcoholics gather no other affiliation." – Tradition Three (the long form)	lism. Hence we may refuse red together for sobriety ma	e none who wish to recover. Nor ought A.A. Membership ever depend by call themselves an A.A. Group, provided that, as a group they have	
suffers." - Tradition Five (the long form)		ary purpose – that of carrying its message to the alcoholic who still	
"Unless there is approximate conformity to A.A.'s Twelve Traditions, the group can deteriorate and die." Twelve Steps and Twelve Traditions, page 174.			

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Toledo OH 43697

O Fax:
419-380-9978
(Attn: Area 55 Registrar)
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