

ANNUAL GROUP REGISTRATION PRINT FORM

Yearly registration with the F.W.S. office is an important part of starting and maintaining your S.L.A.A. Group. When you register your Group for the first time, you will receive a Registration ID number. This number helps us to serve you more efficiently when you contact the Office or make a contribution or purchase. It is vital that accurate registration information be maintained so that F.W.S. can assist those searching for meetings, and also track the growth of S.L.A.A.

Refer to <https://www.slaafws.org/members/> under Guidelines for important guidelines and policies.

PUBLIC GROUP INFORMATION

Do Not Post on Website

The information in this section will be posted on the F.W.S. website unless you check the box above.

F.W.S. policy does not permit the posting of any personal phone numbers, mailing and email addresses on the F.W.S. Website. Visit <https://slaafws.org/anonymity> for more info. **Corporate brand names such as Skype, Yahoo or Google cannot be used in the name of a Group or meeting posted on the F.W.S. website. However, details for connecting to these frequently free corporate services may be specified on another line.**

Has your Group registered before? No or Unknown Yes, Our Group ID is: _____

Is your Group a member of an Intergroup? No Yes, member of: _____

Group Name _____

Meeting Day(s)/Time(s) _____

Location (building, room) _____

Street Address/P.O. Box _____

City _____ State/Province _____

Postal Code _____ Country _____

Contact Email _____

Contact Phone(s) _____

Website Address(es) _____

Language(s) Spoken _____

Meeting Format (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Open meeting (OM) [Open to Anyone] | <input type="checkbox"/> Lesbian/Gay/Bisexual/Transgender/Friends (LGBTF) | <input type="checkbox"/> Step Study (SS) |
| <input type="checkbox"/> Closed meeting (CM) [For Addicts Only] | <input type="checkbox"/> H.O.W. Meeting (HOW) | <input type="checkbox"/> Tradition Study (TS) |
| <input type="checkbox"/> Men Only (MO) | <input type="checkbox"/> People of Color (PC) | <input type="checkbox"/> Multiple Addictions (MA) |
| <input type="checkbox"/> Women Only (WO) | <input type="checkbox"/> Anorexia Focus (AF) | <input type="checkbox"/> Handicapped Accessible (HA) |
| <input type="checkbox"/> Newcomers Meeting (NC) | <input type="checkbox"/> Steps 1, 2, and 3 (123) | <input type="checkbox"/> No Fragrances (NF) |
| <input type="checkbox"/> Getting Current (GC) | <input type="checkbox"/> Book Study (BS) | <input type="checkbox"/> Child Care Available (CC) |
| <input type="checkbox"/> Healthy Relationships Focus (HR) | <input type="checkbox"/> Topic Discussion (TD) | <input type="checkbox"/> Varied Format (VF) |
| <input type="checkbox"/> Lesbian/Gay/Bisexual/Transgender (LGBT) | <input type="checkbox"/> Speaker (S) | <input type="checkbox"/> Screened (SCR) |
| | | <input type="checkbox"/> Prison (PR) |

F.W.S. OFFICE INTERNAL COMMUNICATION - GROUP CONTACT

This section is confidential and will not be posted, you may enter your personal contact info here.

Sign up for the F.W.S. Newsletter and e-Bulletins at <https://www.slaafws.org>.

Contact Person _____

Primary Email _____ Phone Number(s) _____

F.W.S. OFFICE INTERNAL COMMUNICATION - ALTERNATE GROUP CONTACT

This section is confidential and will not be posted, you may enter your personal contact info here.

Contact Person _____

Primary Email _____ Phone Number(s) _____

Signature _____ Date _____

YOU CAN FILL OUT THIS FORM ONLINE AT [HTTPS://WWW.SLAAFWS.ORG/GROUPREGFORM](https://www.slaafws.org/groupregform)

OR FAX THIS SHEET TO +1 210-828-7922

OR MAIL THIS SHEET TO: Augustine Fellowship 1550 NE Loop 410, Ste 118 San Antonio, TX 78209 U.S.A.

For Questions: <https://www.slaafws.org/contact> Call +1 210-828-7900