

Arizona Area 03
GROUP INFORMATION CHANGE FORM

Group Service Number: _____ Date of change: _____
District Number: _____ # of group members: _____
Name of Group _____

Old Information: GSR Name: _____
Old Alt GSR: or Mail Contact: (check one) Name: _____

New Information:
GSR Name: _____ **Group Meeting Location:** _____
Address: _____ **Meeting Address:** _____
City, State, ZIP: _____ **Meeting City and Zip Code:** _____
Phone: () _____
Email: _____
Newsletter by mail: **or email:**

Alt GSR or Mail Contact (circle one)
Name: _____
Address: _____
City, State, ZIP: _____
Phone: () _____
Email: _____
Newsletter by mail: **or email:**

Meeting Days: Sun Mon Tues Weds Thurs Fri Sat
Time: _____
Meeting Type: _____
O- Open C- Closed NS- Non smoking S- Speaker D- Discussion B- Big Book
T- Steps Tr- Traditions H- Handicap Access YP- Young Peoples RC- Remote Community
AN- Ai-Anon meets at same time/location

Please mail this form to:
Area 03 Registrar
811 Mann Ave.
Tucson, AZ 85710
I sent a copy to GSO
I sent a copy to my DCM
I sent a copy to Area Meeting List Coord.
I sent a copy to the Area Meeting List Coord

Okay to list in GSO Directory? Y: N: Groups listed in a GSO Directory and in GSO's Fellowship New Vision database must have a contact name and phone number. Listing in the Directories is for 12 Step referral and/or meeting information.

Reset Form