

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 the [F.A.Q.](#), the [Local Website Guidelines](#), and the [Conference Service Manual](#) and please follow the guidelines and policies contained therein.

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 use of personal phone numbers, mailing and email addresses on the F.W.S. Website. Visit <http://slaafws.org/anonymity> for more info.

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 at <http://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 _____

TO SEND FORM BY EMAIL, SCAN AND ATTACH FILE TO [HTTP://SLAAFWS.ORG/SENDREGISTRATION](http://slaafws.org/sendregistration)

OR FAX TO +1 210-828-7922

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

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