New Al-Anon International Group Registration Form

1. Status  ☐ New  ☐ Not Sure If Registered

2. Group/Registration Overview

Group Name*  
* Reflects Al-Anon principles and is inviting to all. See instructions to fill out the form. Please note that group names not in compliance with the Al-Anon policy will delay processing of the registration. Contact the WSO for further information.

Mailing Language  

Location  
Meeting Place

Complete Meeting Address

Country ________________________________________________________________________________________________________

Group email _____________________________________________________________________________________________________

Phone Contact for the Public

First Name   ________________________________________________ Phone Number   _________________________________________

First Name   ________________________________________________ Phone Number   _________________________________________

3. Meeting Attendees

Day  ________________  Time _____________  ☐ AM  ☐ PM

Meeting Attendees:  ☐ Families, Friends and Observers welcome  ☐ Families and Friends only

Spoken Language  __________________  Member Count  __________

☐ Beginners*  ☐ Introductory**  ☐ Limited Access***
☐ Handicap Access  ☐ Child Care  ☐ Fragrance Free
☐ Smoking Permitted  ☐ Sign Language

Location Instructions _______________________________________

Additional Meeting

Day  ________________  Time _____________  ☐ AM  ☐ PM

Meeting Attendees:  ☐ Families, Friends and Observers welcome  ☐ Families and Friends only

Spoken Language  __________________  Member Count  __________

☐ Beginners*  ☐ Introductory**  ☐ Limited Access***
☐ Handicap Access  ☐ Child Care  ☐ Fragrance Free
☐ Smoking Permitted  ☐ Sign Language

Location Instructions _______________________________________

* Held in conjunction with a regular Al-Anon group meeting, not considered an Al-Anon group. Provide newcomers a simple introduction to Al-Anon.

** Attendance changes frequently; not considered an Al-Anon group. Attendees are invited to go to regular Al-Anon meetings.

*** Meeting access is limited due to the facility’s entry restrictions. These groups meet at sites such as military bases, institutions, industrial plants, or schools.

4. Current Mailing Address (WSO mail for the group is sent to the postal and email addresses)

First Name ___________________________  Last Name ___________________________

Complete Address

Country ________________________________________________________________________________________________________

Phone Number _____________________________________________ Email _________________________________________________

CMA email address is entered here. Please enter Group email address in section #2 (See instructions for more information)

5. Group Representative

First Name ___________________________  Last Name ___________________________

Complete Address

Country ________________________________________________________________________________________________________

Phone Number ___________________________ Email _________________________________________________

The WSO will register any group designating itself as an Al-Anon Family Group with the understanding that it will abide by the Traditions and that meetings will be open to any Al-Anon members. 

Al-Anon/Alateen Service Manual (P24/27), “Digest of Al-Anon and Alateen Policies”

Submitted by: ___________________________  Date: _____________  Phone: ___________________________  Email: ___________________________