

**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: _____
Previous Area 03 Service position (if any). (include District/Sub District): _____

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- Al-Anon meets at same time/location

Please mail this form to:

Area 03 Registrar
1600 W. Carla Vista Dr.
Chandler, AZ 85224

Please send copy to GSO

Please send copy to my DCM
Please send copy to Area Meeting List Coord.
I sent a copy to GSO
I sent a copy to my DCM
I sent a copy to the Area Meeting List Coord

Fill out and save this form as PDF.

Email it to: registrar@area03.org
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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.