



Alcoholics Anonymous Meeting Directory Contacts Form

MEETING / GROUP INFO

Date	_____	District	_____
Meeting Name	_____	GSO#	_____
Day	_____	Time	_____
Location	_____		
Address	_____		
City	_____	ZIP Code	_____
Notes	_____		

Each Meeting / Group should have at least two (2) of the following:

GENERAL SERVICE OFFICE REP (GSO GROUP CONTACT)	GENERAL SERVICE REPRESENTATIVE (G.S.R. CONTACT)
First Name: _____	First Name: _____
Last Name: _____	Last Name: _____
Street: _____	Street: _____
City: _____	City: _____
ZIP Code: _____	ZIP Code: _____
Phone: _____	Phone: _____
E-mail Address: _____	E-mail Address: _____
<input type="checkbox"/> Opt in as a Volunteer	<input type="checkbox"/> Opt in as a Volunteer

TREASURER (TREASURER CONTACT)	CENTRAL OFFICE REP (CENTRAL OFFICE CONTACT)
First Name: _____	First Name: _____
Last Name: _____	Last Name: _____
Street: _____	Street: _____
City: _____	City: _____
ZIP Code: _____	ZIP Code: _____
Phone: _____	Phone: _____
E-mail Address: _____	E-mail Address: _____
<input type="checkbox"/> Opt in as a Volunteer	<input type="checkbox"/> Opt in as a Volunteer

If the Group is to be listed in the Central Office Directory and/or on the WLCO fdlaa.org website, please provide a telephone number and mailing address for the Group Contact and/or General Service Representative and/or Central Office Representative. Listing in the Directory is for 12th Step referral and/or for meeting information. Contacts' name and telephone number will be included in the Directory with the group's name and service number.

Return this form to Winnebago Land Central Office in person 280 N. Main Street, E-mail winnebagolandco@gmail.com.

For questions or more information contact WLCO (920) 922-7512 | winnebagoland@gmail.com | fondulacaa.org