## (for new groups and for annual group re-registration) GROUP NAME: DATE STARTED: (if this is a new group) ..... MEETING DAY: ..... MEETING START TIME: ..... END TIME: ..... FREQUENCY: **MEETING VENUE: (full address with postcode and directions if needed)** IS THE VENUE ACCESSIBLE (including disabled toilet) to wheelchair users or others with mobility difficulties? MEETINGS LIST CONTACTS: (at least 2 if possible, give first names and phone number(s) of each) (NB These contacts are given only to FA helpline volunteers to give out to callers interested in your meeting. They do not go on the website nor given to any other callers). GROUP SECRETARY: TELEPHONE NO: MAILING NAME AND ADDRESS: TREASURER NAME AND ADDRESS (if different person than the secretary): SIGNED: ......DATE:......DATE:..... Please return completed form by email to office@famanon.org.uk

Or by post to: Families Anonymous, The Old Convent, Beeches Green, Stroud GL5 4AD

FAMILIES ANONYMOUS GROUP REGISTRATION FORM