

**Email Address** 

## NA World Services



## NEW GROUP REGISTRATION/UPDATE FORM

This form can be completed online at <a href="www.na.org/?!D=updateforms-newregfm">www.na.org/?!D= updateforms-newregfm</a>
Visit <a href="www.na.org/?!D=subscribe">www.na.org/?!D= subscribe</a> or call 818.773.9999 x771 for information about free communications from NAWS

## Please complete all information (Please print clearly)

Group Code (if	Today's Date	Today's Date						
Group Name								
This group was formed (month/year)				This group holds		meeting(s) per week		
Area Service Cor	nmittee Nam	e						
Regional Service	Committee N	Vame						
Group's Meeting Information								
Meeting Days	Sun	Mon	Tues	Wed	Thur	Fri	Sat	
Meeting Time								
Language(s)								
Format								
Wheelchair Accessible								
Room Name								
Open/Closed*								
*Ope	n NA meetings	welcome addicts a	nd interested ob	servers; closed NA	meetings welco	me addicts only.		
Meeting Location								
OLD (if applicable)					NEW			
Place / Building Name								
Address								
City								
Borough / Sub-Ci	ty							
State/Province								
Zip/Postal & Cou	ntry							
If this meeting is held in a correctional or treatment facility, are there special criteria for entry?								
Group Contact Mailing Address  This is typically a stable group member who can forward any communication from NA World Services to the NA group.  This may or may not be a current group trusted servant, and is not usually the group's meeting location address.								
Group Contact Na	ame (first and	last)						
Address								
City State/Province								
Postal/Zip Country					Phone ( )			