

Al-Anon/Alateen Area 56 (Vermont)

Al-Anon member involved in Alateen service Re-certification Form

Name _____ WSO ID# _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Alateen Group (if applicable) _____

Sponsoring Al-Anon Home Group (of Al-Anon member not Alateen group)

Location _____

I have met and continue to meet the area's safety and behavioral requirements that are effective as of (date of latest edition) _____

Signature: _____ Date: _____

Alateen Process Coordinator Signature: _____ Date: _____

Area Chairperson Signature: _____ Date: _____

bds/Alateen

9/18/04, 11/04, 5/05
Updated 5/06, 5/09
Reviewed 5/07, 8/07, 5/08