



# Event Request



Today's Date \_\_\_\_\_

Area(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested Date \_\_\_\_\_

Alternate Date(s) \_\_\_\_\_

Will the TEAM event be a standalone event or part of another AI-Anon Family Group event?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Length of event: \_\_\_\_\_ How many hours (minimum of six)? \_\_\_\_\_ Over how many days? (1 or 2) \_\_\_\_\_

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## Facility (include (if possible) the facility floor plan/layout)

Facility Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

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## Area Requested Topics of Interest (Please prioritize)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

## Area Signatures

The form must be signed by the Area Delegate and Area Chairperson.

**Area**

Delegate \_\_\_\_\_ Chairperson \_\_\_\_\_  
*please print* *please print*

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**Contact / liaison person who will deal with NZ Al-Anon General Service Office.**

Area TEAM Chairperson \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

**Board members Presentations** – normally the presenting member will start their presentation with a short overview of their personal journey in Al-Anon Family Groups.

**Please fill in ALL information.**

**Send your request to [generalsecretary@al-anon.org.nz](mailto:generalsecretary@al-anon.org.nz)**