



Twelfth-Step-Within Speakers' List Application

Name
Address
Telephone Number(s)
Email
Length of Time in Program
Length of Current Abstinence
Language(s) Spoken
Special Focus subjects about which you would like to speak
Preferred Group Size, if any
How far are you willing to travel?

PLEASE READ AND SIGN: *I certify that I have at least one year of current abstinence, that I have a sponsor, that I sponsor at least one other member of Overeaters Anonymous, and that I regularly attend OA meetings. I will notify the World Service Office of any changes of the above information and my ability to serve as a speaker.*

Signature _____ Date _____

TO BE SIGNED BY YOUR SPONSOR OR A SERVICE BODY OFFICER

I certify that the information above is true and correct to the best of my knowledge.

Signature _____ Date _____

Telephone Number _____ Email _____

Thank you for offering to serve in this important capacity! Your service may save someone's life today. Please forward any changes to the World Service Office at info@oa.org.