



## Twelfth-Step-Within Speakers' List Application

Full 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 Region III Twelfth Step Within Committee Chair, [r3tswchair@region3.org](mailto:r3tswchair@region3.org), of any changes to the above information and my ability to serve as a speaker.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

*I am interested in applying for inclusion in the World Service Twelfth-Step-Within Speakers' List.*

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 Region III Twelfth Step Within Chair, [r3tswchair@oaregion3.org](mailto:r3tswchair@oaregion3.org).