

**New GR Information Sheet:** *Please fill in the requested information and return to the Alternate Delegate before you leave the Orientation meeting.*

**Welcome! We are glad you are here.**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Your Group's Name:** \_\_\_\_\_

**Your Group's WSO ID Number:** \_\_\_\_\_ **(if known)**

**Location and town where your Group meets is:**

\_\_\_\_\_

\_\_\_\_\_

**What District is your group in?** \_\_\_\_\_ **Your Area is Ohio.**

**Your service position is:** (please check one)

- **Group Representative**



- **District Representative**



- **Other:** (Please list) \_\_\_\_\_