

Alateen Sponsor Training and Recovery (ASTAR)

Friday APRIL 12 - Sunday APRIL 14, 2024

Who: Any Al-Anon members interested in serving or supporting Alateens, Alateen Group Sponsors, Alateen Coordinators, Alateen Safety Trainers, and District Representatives.

(Attendees must be 18 or older and attend as Al-Anon members) AMIAS must be 21 and have 2 years in Al-Anon.

Where: Lazy F Camp and Retreat Center, 16170 Manastash Road Ellensburg, WA 98640

Website: www.lazyfcamp.org

When: Full Weekend: Friday 5 PM – Sunday 11 AM

(Friday and Saturday Sleeping Accommodations, Friday evening potluck, Meals: Saturday Breakfast, Lunch and Dinner, Sunday Breakfast)

Saturday Only: Saturday 8 AM – 10 PM (Meals: Saturday Breakfast, Lunch and Dinner)

What: Al-Anon Member Involved in Alateen Service Initial and Recertification training, problem solving, recovery meetings, and lots of fun and fellowship!

Cost: Full Weekend: Early Bird (by 1-25-24) \$140, Standard (by 3-29-24): \$150

Saturday Only: Early Bird (by 1-25-24): \$90, Standard (by 3-29-24): \$100

All Registrations are due by Friday (3-29-24)

Registrations are non-refundable; however, they are transferable.

Please contact Eliza D. (206)375-2235 with program questions, registration questions, or email ASTARreg@wa-al-anon.org.

Make Checks or Money orders out to: WA Area AFG - ASTAR (do not send cash)

Mail your payment and form to: ASTAR 2023, C/O Michael S., 1447 Old CC Road, Colville, WA 99114

<p>Please type or print clearly especially email address or phone#...</p> <p>Name _____</p> <p>Phone _____</p> <p>EMAIL _____</p> <p>CITY _____</p> <p>District _____</p> <p>AMIAS# _____ No AMIAS# _____</p> <p>Want Initial training _____ or re-cert training _____</p> <p>Years as an AMIAS _____</p> <p>Do you have skills that we can use during the event?</p> <p>Chair a meeting _____</p> <p>Arts n Crafts _____</p> <p>Make coffee _____</p> <p>Lead a hike or walk _____</p> <p>Help with game/ skit _____</p> <p>Other _____</p> <p>Interested in Spanish Training? _____</p> <p>Can help Translate? _____</p>	<p>Please check box those that apply</p> <p><input type="checkbox"/> DIETARY RESTRICTIONS</p> <p><input type="checkbox"/> GLUTEN FREE</p> <p><input type="checkbox"/> VEGAN</p> <p><input type="checkbox"/> DAIRY FREE</p> <p><input type="checkbox"/> OTHER _____</p> <p>Sleeping Arrangements</p> <p>Beds are single or bunk beds</p> <p>If you are capable of using a top bunk this would free up beds for the less able bodied.</p> <p><input type="checkbox"/> TOP BUNK <input type="checkbox"/> BOTTOM BED</p> <p><input type="checkbox"/> EARLY RISER <input type="checkbox"/> LATE RISER (Early to bed or night owl)</p> <p>Do you SNORE? _____ CPAP MACHINE _____</p> <p>List people you would like as roommates:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>This year Bedding is included. Bring towel, washcloth, medications and sundries.</p>
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