

**INMATE CORRESPONDENCE  
ALCOHOLICS ANONYMOUS  
COLORADO AREA 10**

**I AM RESPONSIBLE** - When anyone, anywhere, reaches out for help, I want the hand of AA always to be there. And for that: I AM RESPONSIBLE.

AA members on the "outside" can contribute to their own sobriety and that of the inmate by becoming a Corresponding Contact. The Corresponding Contact communicates with the inmate by letter sharing their experience, strength and hope. This helps the inmate to become acquainted with AA on the outside and your letter becomes a meeting in print for the inmate.

It is suggested that men work with men and women work with women.

Group participation with individual inmates is encouraged.

The Correspondence Chairperson will send you the name and address of the inmate along with guidelines we have found useful.

**Please fill out the form below and mail or e-mail to:**

**Area 10 Correspondence  
P.O. Box 1645  
Avon, CO 81620**

**or E-Mail the following information to:  
friendofbill@comcast.net**

If you choose to use the Area 10 Correspondence PO Box please check the box below. Your name and mailing address will be forwarded to the Corrections Desk at our General Service Office in New York; GSO will send you a letter, instructions and an Inmates name and contact information to your mailing address. You will be the first point of contact with that Inmate, if you choose to use the PO Box listed above as your return address you may do so and the Area 10 Correspondence Chair will forward all correspondence from a correctional facility to the mailing address you provide.

**Please check the box if you wish to use the Area 10 Correspondence PO Box listed above as your mailing address:      Yes: \_\_\_\_\_**

**CORRESPONDING CONTACT INFORMATION (please print)**

NAME: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Home Group: \_\_\_\_\_ Female: \_\_\_\_\_ Male: \_\_\_\_\_

Are you currently attending AA meetings in State Correctional Facilities?

If so, where: \_\_\_\_\_

Email address: \_\_\_\_\_

Is this a request for group participation? Yes \_\_\_\_ No \_\_\_\_ Group Name: \_\_\_\_\_

Are you willing to have more than one contact? Yes \_\_ No \_\_ Up to how many? \_\_\_\_