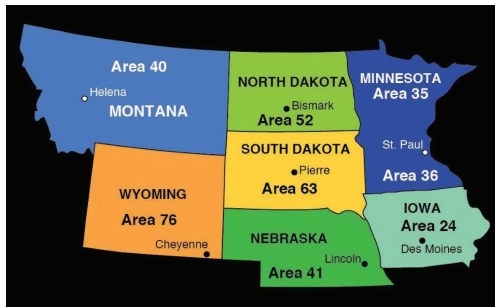


# AA – A Solution for All Generations

## 2018 West Central Region Alcoholics Anonymous Service Conference



**March 2, 3, & 4 – 2018**

**West Des Moines Marriott**

1250 Jordan Creek Pkwy

West Des Moines, IA 50266

515-267-1500 for Reservations

**For group room rates on or before 2/15/18**, mention reservation code WCRAASC. One king or two queen beds (\$107.00 + tax).

**Other nearby hotels include:** Fairfield Inn & Suites (515) 225-6100, Residence Inn (515) 267-0338, Courtyard (515) 223-9800, and SpringHill Suites (515) 223-9005

For transportation from Des Moines International Airport (DSM) to West Des Moines call West Des Moines Marriott to arrange a shuttle ride to the hotel.

### Friday, March 2nd

2:30p Registration  
 3:30p Early Bird Meeting  
 7:00p Opening and Welcome  
 Meet the Delegates/  
 Area Highlights Meet the  
 Trustee/Report  
 8:00p General Session 1 –  
 “Today’s Alcoholic,  
 Inclusion not Exclusion”  
 8:45p Break  
 9:00p GSC Agenda Items I

9:00a General Session 2 –  
 “Participation in All of AA:  
 Is My Triangle Balanced”  
 9:45a Break  
 10:00a GSC Agenda Items II  
 11:30a Lunch (on your own)  
 12:45p Breakout Sessions  
 1:45p Break  
 2:00p Breakout Sessions  
 3:00p Break  
 3:15p General Session 3 –  
 Attraction not Promotion:  
 A.A.’s Relation to the World  
 4:00p Break  
 4:15p GSC Agenda Items III  
 6:00p Dinner (*on your own*)

7:30p Open AA Speaker  
 Meeting – Clement C.  
 (GSO)  
 8:45p Break  
 9:00p GSC Agenda Items IV

### Sunday, March 4th

7:00a Early Bird Meeting  
 8:00a General Session 4 –  
 AA Technology: Where  
 Innovation meets the  
 Traditions  
 8:45a Break  
 9:00a “Ask It Basket” and  
 General Session 5 –  
 with the Trustees

### Saturday, March 3rd

7:30a Early Bird Meeting  
 8:45a Opening and Welcome

**Contacts: Wanda P. (515) 554-6866 – Dan G. (641) 485-6731**

To complete online registration visit: <https://wcraasc.cheddarup.com>

## Registration Form – Please print clearly

**Registration Fee – \$15** Mail to: WCRAASC., PO Box 367, Des Moines, IA 50302

**Preregistration must be received by 2/19/2018**

Name \_\_\_\_\_ Name on Badge \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Home Group \_\_\_\_\_

Position (GSR, DCM, etc.) \_\_\_\_\_ District Represented \_\_\_\_\_ Area Represented \_\_\_\_\_

Special Needs Request \_\_\_\_\_