Name:	
Address:	
City, State, Zip:	
Phone number: Day	Night
Email address:	
Race:	
Ethnicity:	
Primary Language:	
Name of your ELCA Congregation: _	
Congregation City and State:	
Written Response (You may submit	•

t or paper.)

- 1. How are you involved in Women of the ELCA?
- 2. How many times have you attended WELCA Triennial?
- 3. Are you a delegate for the 2026 WELCA Triennial? Y or N

Email completed application to Linda Heyde at lheyde52@aol.com no less than three months prior to the 2026 WELCA Triennial registration deadline.