

I will make of you a great nation, and I will bless you, and make your name great, so that you will be a blessing.

— Genesis 12:2 NRSV

THE 19TH CONVENTION OF THE SOUTHWEST CALIFORNIA SYNOD WOMEN OF THE ELCA

2016 Friday afternoon, October 14
through noon, Sunday, October 16

GRAND VISTA HOTEL
999 Enchanted Way, Simi Valley



BIBLE STUDY LEADER

Rev. Erin Martinson, CHTP, Pastor at Trinity Lutheran Church, Ventura
Certified Healing Touch Practitioner and Spiritual Development Coach

CHAPLAIN & WORSHIP LEADER

Rev. Nancy Switzler, Pastor at Our Redeemer Lutheran Church, Oxnard

CHURCHWIDE REPRESENTATIVE - TBA

ALL WOMEN ARE WELCOME TO ATTEND

Women from Southwest California Synod churches are urged to send a representing delegate

WEEKEND PACKAGES AVAILABLE

See registration form or contact Julie Jensen, convention registrar:
921 Gill Avenue, Port Hueneme, CA 93041

Questions: Contact Julie at juliejnsn1@roadrunner.com
or phone (805) 486-5762

We pray that this convention may be led by the Holy Spirit to mobilize women to ACT BOLDLY on their faith in Jesus Christ, our Lord. We look forward to seeing each and every one of you there.



**THE 19TH CONVENTION
OF THE SOUTHWEST
CALIFORNIA SYNOD
WOMEN OF THE ELCA**

October 14 - 16, 2016

**Grand Vista Hotel
999 Enchanted Way
Simi Valley**

Total Amount Enclosed
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Make checks payable to
WOMEN OF THE ELCA
and mail, along with this completed
form to Julie Jensen, registrar
921 Gill Avenue,
Port Hueneme, CA 93041

Registration deadline is
September 30th

Registration is transferable
but NOT refundable

Question? call (805) 486-5762

REGISTRATION FORM

Name: _____

Address: _____

City/Zip: _____

Phone: _____

E-mail: _____

Church: _____

Church City: _____

- Delegate Non-delegate Visitor

In case of an emergency, contact:

_____ Phn # _____

CONVENTION PACKAGES:

Registration deadline is September 30th.
A 50% deposit sent by July 1st will hold your spot.

- Two per room:.....\$290** per person
Includes full weekend / four meals / convention registration & hotel

Roommate name: _____
Please provide separate registration form for roommate.

- One per room:..... \$345**
Includes full weekend / four meals / convention registration & hotel

- Saturday only:..... \$120** Includes two meals
and convention registration

- Friday night dinner..... \$35** (optional)

- Special dietary needs:**
