

**Women's Missionary Society  
9th Episcopal District  
African Methodist Episcopal Church  
NORTHEAST CONFERENCE**

**QUADRENNIAL INTENT FORM**

I am seeking election as: (Check one)

Delegate

Alternate

**NAME:**

**ADDRESS:**

**CITY:**

**PHONE:**

**CELL:**

**E-MAIL:**

**Name of Local Church and City:**

**Name of Local Society:**

**Annual Meetings Registered & Attended during the past four (4) years:**

**(2022)**

**(2023)**

**(2024)**

**(2025)**

**WMS Participation (Must be active on ALL levels)**

The Recording Secretary of the Conference shall keep an accurate roll of members. Only those who have been members for four (4) or more consecutive years shall be eligible to be elected delegates to the Quadrennial Convention. Persons who transition to the WMS with uninterrupted time as a YPDer shall be eligible to be elected delegate to the Quadrennial Convention after two (2) consecutive years as active WMS members. They shall be active on all levels and have attended at least two (2) Annual Conference Meetings. **Constitution &**

**Bylaws pg. 35 Section 8**

**Please place checkmark in the box below:**

	<b>2022</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>
<b>Local Meetings</b>				
<b>Area Meetings</b>				
<b>Conference Meetings</b>				
<b>Episcopal District Meetings</b>				

Why do you want to be a Delegate/Alternate from your Conference?

Have you been a Delegate/Alternate before?

What year(s)?

**SIGNATURES**

Applicant:

Local President:

Local Pastor:

**TO BE COMPLETED BY THE NOMINATING COMMITTEE**

Date Received:

Nominating Committee Chairperson's Signature:

Conference President's Signature:

Meets Requirements

Yes

No

Comments (if no):

**Return completed intent form with all required  
signatures to be received by the Nominating Committee**

**Chair on or before:**

**August 7, 2026**

Nominating Committee Chair  
Mrs. Denise Bellamy  
433 Lee Road 102  
Smiths Station, AL 36877

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Telephone number: 706-761-3588