

Arnprior & District Quilters Guild Quilt Show Entry Form 2010

Please note:

Every quilt must have a completed copy of this form safety pinned to its FRONT and visible through the bag. So please make multiple copies if necessary.

PLEASE PRINT CLEARLY

Owner's Name: _____

Telephone No.: _____ **Email address:** _____

Street Address: _____

Town/City: _____ **Province:** _____ **Postal Code:** _____

Quilt size: Measure your quilt to the next largest whole inch. Please be exact. *(If the quilt is not square or a rectangle, sketch an outline of the quilt on the back of this form and provide detailed measurements.)*

Width across top of quilt: _____

Length of the quilt at the longest point: _____

Special Instructions: Are there any special hanging instructions *(such as: matching pillow included, excessively heavy, etc.)*?

Since the following section will appear on the front of your entry, please PRINT your information CLEARLY for our visitors.

Quilt name *(if the quilt is not named, please give the block or pattern name):*

Approximate date the quilt was made:

Made by:

About this quilt: In three sentences or less, please provide the story of the quilt.

Is Your Quilt for Sale? Yes No

If yes, Please provide a minimum of 10 business size cards stating your contact information; name, phone number and/or email address.

Signature _____ **Date** _____

Other directions:
