

WSQG QUILT ENTRY FORM

Event , Date	
Your Name	
Address	
Phone Number	
Name of Quilt/Item	
Name of Piecer (if different from above)	
Name of Quilter (if different)	
Size of Quilt/Item (length vs. width)	
Quilt Story	Yr. made, materials used, inspiration, who made for
Quilt Maker Bio	People love reading about you (use back if needed)^
For Sale?	Amount
Can event workers negotiate price?	If yes, Final amount

The committee will take the utmost care of your quilts and other items. Your signature below holds the Washington Stars Quilt Guild and its representatives not at fault for any quilt loss or damage and indicates that you agree to abide by the rules and decisions of the Washington Stars Quilt Guild.

Signature _____ Date _____

DISPOSITION OF FORM: MAKE 3 COPIES. ATTACH 1 COPY TO BAG QUILT/ITEM IS DELIVERED IN (ONE BAG PER QUILT/ITEM); TURN THE SIGNED ORIGINAL IN AT THE APPROPRIATE GUILD MEETING WITH THE QUILT/ITEM IN ITS BAG WITH THE ATTACHED COPY. PLEASE DO NOT USE A BLACK PLASTIC BAG WHEN SUBMITTING YOUR QUILT. KEEP ONE COPY FOR YOUR OWN RECORDS.