## **REGISTRATION FORM** Q.U.I.L.T., Inc. -- Quilt Show 2017 -- Celebrate Quilting! April 22 - 23, 2017

## All Items MUST Be Completed

Priority Number		Judged Item?YesNo		
Name	Phone	E-mail		
Street	City	StateZII	)	
Title of entry:			<del></del>	
Width: inches	Length: inches	Framed:YES	NO	
		ging/transportingYES the committee. You will be contac		
judged or not. Please inc whom; anything interest	clude relevant information such ing about the pattern or fabric;	out your quilt (35 words or less) was your inspiration, why you man details like an unusual/interesting tead to judges (see information sh	de the quilt and/or for going back, etc. This	
Quilting Technique (a bo hand quilted by self OF quilted on regular sewing quilted on long arm mand other, explain Quilt Design (a box must)	pack of each photo. Attach pho ox must be checked): R \subseteq hand quilted by other (name ang machine by self OR \subseteq by other archine by self OR \subseteq long arm ma	me, phone number, title of entry oto to registration form.  e) ner (name) achine by other (name)		
<ul><li>□ Original Design</li><li>□ Pattern by:</li></ul>	Pattern <sup>-</sup>	Title:	<u></u>	
□ Other				

Piecing/Appliqué Technique Used:				
Special details: Is the	item one of	the following:		
		(Renaissance)	Framed ItemChallenge Spring 2016 (Pine Bush)Challenge Spring 2017 (Home)	
Item for sale: Yes	No	Price \$	(20% of sale retained by Q.U.I.L.T., Inc.)	
Insurance Value of Qu	uilt (see info	rmation sheet	to help determine value): \$	
=	=		T., Inc., 2017 Show and I understand that my signature gives my quilt on the Q.U.I.L.T., Inc. website.	
Signature			Date	
Deadlines:				
2017, guild meeting o Monday, February 6,	r postmarke 2017.  Mail ations are re	ed by January 1 Registration Fo eceived, registr	the Registration Committee before the end of the January 13, 3, 2017. All other registrations must be postmarked by orms to Q.U.I.L.T., Inc., PO Box 523, Delmar, NY 12054-0523. If ration date will be one of the criteria used to determine which	
Include in your envel	ope:			
<ul><li>each judged item (</li><li>Photo of each item</li></ul>	em (\$3 per \$7 per item (finished o phone num	item EARLY REG EARLY REGISTF r not) ber, title of ent	GISTRATION; \$5 per item after Jan. 13, 2017) RATION; \$9 per item after Jan. 13, 2017) try and attach to form with staple or paper clip — no tape only one required	
Make checks payable will be sent via your S			ow. Instructions for labeling, delivery and pickup of entries	
QUESTIONS: Contact bmetzger52@yahoo.o		s at 439-1194,	mphill2@nycap.rr.com or Barbara Metzger at 283-5135,	