

Lethbridge Festival of Quilts 2017
 Presented by Lethbridge Centennial Quilters Guild
 June 2&3, 2017, Lethbridge College
 www.lethbridgequilters.ca

QUILT SHOW ENTRY FORM (one form per Entry)

NAME _____ PHONE _____

ADDRESS (with postal code) _____

E-MAIL ADDRESS _____

ENTRY TITLE _____

ENTRY CATEGORY: Check one only

	Art Quilt		Bed Quilt Original/Traditional
	Wall Quilt from Pattern/Book/Workshop		Hand Quilted
	Bed Quilt from Pattern, Book/Workshop		Wall or Bed Quilt Modern
	Wall Quilt Original/Traditional		Wearables
			Youth

ENTRY INFORMATION:

SIZE OF QUILT _____ width (in inches) by _____ length (in inches) Please **measure accurately.**

Construction Techniques :

Description/Artist Statement:

Quilted by:

Other credits, inspiration, books used, contributors, commercial pattern:

Acceptance preference for multiple entries: Please check one: **1** **2** **3** **4**

Please indicate if you would like to place this item for sale: NO YES and price offered _____.

I understand that all items accepted will be displayed for the duration of the show. I understand that the Lethbridge Centennial Quilters Guild will take all reasonable precautions to safeguard my entry, but I assume all risks for any loss or damage sustained during the entire show period from collection to return of entries. I am responsible for any insurance coverage on my entry. I hereby give permission for my work to be photographed for possible inclusion in promotional materials. I understand it may also be published on the Lethbridge Centennial Quilters Guild website.

Signature _____ Date _____

Please send entry forms to:

Lethbridge Centennial Quilters Guild c/o Kathy Oliver, (#9 -240 Heritage Boulevard West, Lethbridge Alberta T1K 7H3) or via e-mail entry@lethbridgequilters.ca