

# QUILT ENTRY REGISTRATION FORM FOR *Quilt Celebration 2006*

A separate form must be completed for each entry. Photocopies of this form are acceptable.  
**PLEASE KEEP A COPY OF THIS FORM TO BRING WITH YOU WHEN YOU PICK UP YOUR QUILT!**  
Please make sure your name, address and phone number are attached on to the back of your quilt.

## ENTRY INFORMATION

Please refer to accompanying directions for completing this registration form.

Name \_\_\_\_\_

E-mail address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Is your entry a (please check one)

\_\_\_\_\_ Quilt  
Quilt name \_\_\_\_\_

Quilt size (attach correct size hanging sleeve)  
Length \_\_\_\_\_ + Width \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ Garment  
\_\_\_\_\_ vest or \_\_\_\_\_ jacket

## INSURANCE VALUE (see instructions)

\$ \_\_\_\_\_  
Attach appraisal if required.

## ENTRY FEE .....\$4.00

Checks payable to Oakland County Quilt Guild  
**Entries must be postmarked by March 1st, 2006**

A photo of your quilt must accompany entry.  
\_\_\_\_\_ E-mailed to [martmart@yahoo.com](mailto:martmart@yahoo.com)  
\*\*\*\*Preferred method  
\_\_\_\_\_ Attached (no larger than 4x6, digital  
photos printed on plain paper are acceptable)

## ARRIVALS AND RETURNS

Please indicate below the method by which entry will be delivered and returned.

\_\_\_\_\_ Deliver via UPS by April 10-12

\_\_\_\_\_ Return by UPS

\$ \_\_\_\_\_ Return insurance value

\$ \_\_\_\_\_ Return shipping costs

\$ \_\_\_\_\_ Amount enclosed for return

**Include a separate check or money order with your quilt(s).**

\_\_\_\_\_ Hand Deliver to First Baptist Church of  
Lake Orion

\_\_\_\_\_ Will pick up at end of show (**Bring a copy of this form for each quilt being picked up**)

Name of person picking up quilt if other than the quilt entrant \_\_\_\_\_

## AGREEMENT

I have read the entry requirements and agree to abide by the rules and decisions of Oakland County Quilt Guild. I understand that OCQG and First Baptist Church will take every precaution to protect my quilt(s) during the event but cannot be held responsible for acts of God beyond their control. I give permission for my quilt(s) to be photographed and the photos used in any publication related to the event.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Show Committee Use Only

Entry # Assigned \_\_\_\_\_

Date Form Received \_\_\_\_\_

Total # of Entries submitted \_\_\_\_\_

Fees Received: \_\_\_\_\_

Entry Received and accepted \_\_\_\_\_

Date Returned \_\_\_\_\_

Walk-in Returned to \_\_\_\_\_

Signature \_\_\_\_\_

Released by \_\_\_\_\_

*QUESTIONS? Contact Amy Schuster at (248) 601-0127*

Please complete information for quilt label and/or show catalog

Entrant's Name \_\_\_\_\_ Entry # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Year Entry Made \_\_\_\_\_

Title of Entry \_\_\_\_\_

Brief Description \_\_\_\_\_