QUILT ENTRY REGISTRATION FORM FOR *Quilt Celebration 2006*

A separate form must be competed 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 martmart00@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 _____

_____