

# Appleseed Quilt Show August 12 - 14, 2010

## Quilt Entry Form

Each entry requires a separate entry form. Copying of form is permitted.  
ENTRY MUST BE POST-MARKED BY JULY 1, 2010

Name (please print) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime phone number \_\_\_\_\_ Evening phone \_\_\_\_\_

Email address \_\_\_\_\_

Name of Entry \_\_\_\_\_

Width \_\_\_\_\_ Length \_\_\_\_\_ Year Made \_\_\_\_\_

Quiltmaker(s) \_\_\_\_\_

Quilter \_\_\_\_\_

Brief description of 25 words or less to be included on display card (quilt pattern, history, recipient, etc.).

Attach additional sheet if necessary.

FOR YOUTH EXPO QUILT ONLY: Age of Quilter: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Category - Check only one

- |   |                                     |
|---|-------------------------------------|
| <input type="checkbox"/> Pieced                                     | <input type="checkbox"/> Wall Quilt |
| <input type="checkbox"/> Appliqué                                   | <input type="checkbox"/> Miniature  |
| <input type="checkbox"/> Mixed Technique                            | <input type="checkbox"/> Art Quilt  |
| <input type="checkbox"/> Ensemble (made by two or more individuals) |                                     |

Entry (mark one) will be \_\_\_\_\_ shipped \_\_\_\_\_ hand-delivered (See Entry Submission p.3)

**For Judged Entries Only:** I live within 60 miles of Fort Wayne, IN \_\_\_\_\_ yes \_\_\_\_\_ no  
I wish to enter this item and agree to abide by the entry rules/judges' decisions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Enclose a \$10 payment with entry form. Method of payment: check, money order or cashier's check payable to **Appleseed Quilt Show**. Sorry, no credit cards accepted.

Quilts will be photographed for an Appleseed Quilt Show memory CD that may be purchased by show attendees and participants. These photos will be for the sole purpose of personal memories. They may NOT be copied or published. I give my permission to AOG to photograph my item solely for this purpose.

\_\_\_\_\_ yes \_\_\_\_\_ no Initials \_\_\_\_\_

DISCLAIMER: Appleseed Quilters Guild will take every precaution to ensure the safety of your quilt while in our care, possession, and control. However, if you wish to insure your item, the insurance for it will be your responsibility.

**SEND ENTRY FORM TO:** Appleseed Quilters Guild, PO Box 10484, Fort Wayne, IN 46852-0484. Be sure to include the judging fee for any quilts that will be judged.

**QUESTIONS?** Contact Janet Ditton at 260-341-8421 or [jmditton@verizon.net](mailto:jmditton@verizon.net). Please indicate "Quilt Show" on the subject line of the email.

Entry Form