

JOHNSON CITY QUILTERS' GUILD
"THEN AND NOW"
SEPTEMBER 20, 2008

ENTRY FORM Please complete one form for each quilt entered.

This form must be received at address below by SEPT. 5.

e-mail form to ntshabby@moment.net or cmat@tstar.net or mail to P. O. Box 309 J.C.

Exhibitor: Last Name _____ First _____

Address: _____ City/State _____ Zip _____

Phone(day) _____ Phone(night) _____ Cell _____

E-mail _____

Title of Piece: _____

Main colors: (be specific) _____

Maker(s): _____ Quilter(s) _____

Size: Give measurements in inches, as your item will hang in the show.
_____ inches side to side (width) _____ inches top to bottom (length)

Value: Approximate value for insurance purposes. \$ _____

Judging Status: Is your item to be _____ judged _____ non-judged

Design Source: _____ Existing Pattern _____ Commercial Pattern _____ Computer
_____ Adaptation* _____ Traditional _____ Original

_____ Workshop* Other: what/where _____

*Specify source _____

Comments: Describe our quilt's design aspects on the back of this form. Please limit yourself to 100 words or less (may be edited for label and/or program).

Category: check one.

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|--|----------------------------|-----------------------------|
| _____ 100 Vintage Quilt—will not be judged | _____ 400 Machine Quilted | _____ 700 Round Robin |
| _____ 200 Children's Quilts | _____ 500 Wall Hanging | _____ 800 Works in progress |
| _____ 300 Hand Quilted | _____ 600 Miniature Quilts | _____ 900 Leftovers |