

RQG HARVEST OF QUILTS XII
SEPTEMBER 22 & 23 2017
ENTRY REGISTRATION FORM DUE AUGUST 2, 2017

Name _____
must be a RQG member.

Email _____

Phone # Home _____ Cell _____

Quilt Title: _____

Quilt made by: _____
list all names if group quilt.

Quilt quilted by: _____
list all names if group quilt

Approximate value of entry for insurance purposes: \$ _____
(If valued at greater than \$1200.00, please provide a written appraisal amount.)

Measurement of quilt entry:

Width: _____ inches Length: _____ inches

Do you want this item judged? YES _____ NO _____

Please make a copy for your records.