

Celebrating Well Pieced Lives Exhibit Registration Form

Please submit application by September 6, 2025

Email _____

Quiltmaker _____

Address _____

Quilt Name _____

Year Made _____ Measurement _____ width in inches _____ Height in Inches

Predominant colors: _____

Describe the quilt: _____

Is the quilt for sale? _____ Price _____

Dropped off by _____

Picked up by _____

Exhibitor's Signature _____