

LONGARM QUILTING BARN ORDER FORM

Please fill out and place inside shipping box with your quilt top and batting (if providing).

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

QUILT DISCRIPTION: _____

QUILT LENGTH: _____

QUILT WIDTH: _____

WIDTH _____ X LENGTH _____ = _____ X .020= _____

PATTERN CHOICE (FIRST CHOICE): _____

(SECOND CHOICE): _____

QUILTER'S CHOICE: CIRCLE YES (if you'd like me to choose your pattern)

THREAD COLOR: (FIRST CHOICE): _____

(SECOND CHOICE): _____

QUILTER'S CHOICE: CIRCLE YES (if you'd like me to choose your thread color)