

Check one: _____ This is my primary registration. _____ I'd like to also register this quilt, if there is room.

Last Name:	First Name:
Email:	Phone:
Quilt Maker:	Quilted by:
Title of Quilt:	Date Registered:
Finished Size of Quilt: (As it should be hung) Please be as accurate as possible. Length: _____ (top to bottom) Width: _____ (side to side)	Quilt Category: (Circle) Bed Wall Lap Other _____ Is this a MODA BLOCKHEAD project? Yes No
If this is a challenge quilt, circle year: 2024 2025 Award?? Yes No	Main Colors of front of Quilt: Backing description/colors:
Quilt Style: (Circle) Traditional Sampler Row by Row Modern Art Quilt Abstract Civil War T Shirt Quilt Paper Pieced Appliqué Other _____	Quilt Theme: (Examples: Holiday, Baby, Alphabet, Military, Patriotic, Religious, Woodlands, Dinosaurs, Seashore, Outer Space, Thread Spools, Vacation, Zoo Animals, Transportation, Block of the Month program, etc. etc.)
Insurance Value \$ _____ (Material costs only)	Signature:

Please write what you would like to have the quilt tag say: