Seaport Quilters' Guild Annual Quilt Show Registration Form -- DUE APRIL 1

No. _____

(Guild's use only)

PLEASE PRINT NEATLY

Look for a	entagory descriptions of	t www.seaportquilters.org.
		Year made:
		Youth's Age
Quilted B	y:	
Phone #		City
		or Decor
Quilt Nan	ne or Type of Wearable by: (Please state the <u>na</u>	
Quilt Nan Inspired b Teacher, 1	ne or Type of Wearable by: (Please state the <u>na</u>	or Decor

White – Mail to Seaport Quilters' Guild, PO Box 491, Lewiston, ID 83501
Yellow Sheet – Safety Pin to back of Quilt
Pink Sheet – Turn in when you pick up Quilt after Show

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	(Guild's	s use	OHIV

No.

Look for	Category: category descriptions at ww	ww.seaportquilters.org.
Quilted F	By:	
Phone #		City
Quilt Na	me or Type of Wearable or I	Decor
Teacher,	Person, etc.)	
Teacher, Size:	Person, etc.) Inches Wide by	_ Inches Tall
Teacher, Size:	Inches Wide by ets: (Please keep to 4 lines or	_ Inches Tall r less)
Teacher, Size:	Person, etc.) Inches Wide by	_ Inches Tall r less)
Teacher, Size:	Person, etc.) Inches Wide by ets: (Please keep to 4 lines or	_ Inches Tall r less)
Teacher, Size:	Person, etc.) Inches Wide by ets: (Please keep to 4 lines or	_ Inches Tall r less)