Official Entry Form

WNCQG Quilt Show "Garden of Quilts"
May 5-6, 2017
BonClarken, Flat Rock, NC

Use one form per entry. The form may be photocopied. A non-returnable color picture must accompany each entry.

Please mail form to: Natalie Rockley, 32 Hamilton Drive, Hendersonville, NC, 28739.

Entry forms must be received by April 1, 2017

Personal Information (please print)

Name: _____

Address: _____

Email: _____

Phone: _____

Duet/Group Quilt? Yes _____ No _____

If yes, list all other entrants: _____

_____

_____

How was this quilted? Domestic Machine _____ Long Arm Machine _____ By Hand _____

Quilt Entry Information

Name of Quilt Entry: _____

Category #: _____ (See list in Show Rules.)

Date Completed: _____

Size: _____"wide by _____"long

Quilt Entry Type: ____ For Competition OR ____ For Exhibit Only

Special Exhibit?

_____ WNCQG 2016 Challenge Quilt

_____ WNCQG 2017 Challenge Quilt

_____ Other, please specify: _____

If FOR SALE

Quilt Price: _____

(Price includes 20% commission to guild.)

Please give a brief, 25 words or less, description of your entry, your inspiration, source of design/pattern, or techniques you wish to share:

_____

_____

_____

(Or Email your description to natalierockley@gmail.com. Be sure to include your name and the name of your entry.)

Quilt Delivery/Return:

My entry is to be: _____ Hand delivered **May 2** _____ Shipped
My entry is to be: _____ Picked up on **May 6** _____ Shipped back
Prepaid Return Shipping Method: _____ USPS _____ UPS

I have enclosed the following:

_____ Completed entry form. One form per entry.

_____ A non-returnable color image of the quilt. Can be printed on regular paper. 5x7 max size preferred.
_____ Check for $10 per quilt for WNCQG non-member.

Required Signature

I wish to enter the above item and agree to abide by the quilt show rules and decisions of the judges. I understand the WNCQG will take every precaution to protect my quilt during storage and exhibition at this show. I realize they cannot be held responsible for the acts of nature or others beyond their control. The Western North Carolina Quilters Guild cannot be held responsible for quilts **and is not insuring** them. I give my permission to WNCQG to photograph this entry for its files, publicity, education, and/or show promotion purposes in print and/or electronic media.

Signature: _____ Date: _____

Quilt Delivery and Return
Mail In Delivery
To be completed and sent with your quilt

Mail to:
Joanne Shafer, 1468 Mount Olivet Road, Zirconia, NC 28790

Please complete the following, for each quilt you enter:

Quilt Maker's Name: _____

Quilt Name: _____

Email Address: _____

I plan to receive my quilt by (Circle One): Hand Return Mail Return

Confirmation of quilt receipt will be acknowledged by email.

Please mail no earlier than April 10, 2017. Remember quilts must *be received* by April 28, 2017. We recommend you select a tracking option when using USPS or UPS. No special deliveries will be accepted. Please label any pillow cases, plastic bags, etc. that you wish to have returned with your name and the name of your entry.

Hand Return

You will receive confirmation when your quilt is received, by email. This confirmation will serve as your claim ticket and must be presented when picking up your quilt. If you cannot personally be there to pick up your quilt, please see that your designated pick-up person has this claim ticket. No quilt will be returned without a ticket.

Pick up your quilt at **Bonclarken on Saturday, May 6,2017 between 5:00 and 5:30PM.**

Mail Return

Include your prepaid return shipping label (USPS or UPS only) when mailing your quilt. Every effort will be made to repack your quilt for return shipping in a manner similar to that in which you shipped it. Please make sure that your carton will withstand two trips. All items will be placed in the mail by May 12, 2017.

Quilt Delivery and Return
Hand Delivery

Bring this Claim Ticket (You will need one for each quilt you enter.) with your quilt

on **Tuesday, May 2, 2017 between 10:00AM and 12:00PM**

to **BONCLARKEN, Youth Activity Building.**

This claim ticket will be validated and returned to you as verification and **must be presented** when picking up your quilt. If you cannot personally be there to pick up your quilt, please see that your designated pick-up person has this claim ticket.

Pick up your quilt at **Bonclarken on Saturday, May 6, 2017 between 5:00 and 5:30PM.**

*** * * * * * * * * * CLAIM TICKET * * * * * * * * ***

Quilt Maker's Name: _____

Quilt Name: _____

Received by: _____

Returned to: _____