

Size of Quilt: width _____ length _____

Priority # _____

Acquisition Form
Courthouse Quilters Guild Quilt Show - October 5 - 7, 2018

Name: _____

Cell phone: _____

Address: _____

Attach photo of quilt in space below.

Member in good standing _____ (y/n)

(No larger than 3 x 5 inches)

Name of Quilt: _____

Year made: _____

Quilt maker, if other than above: _____

Original design? Yes _____

If not, include the designer and the pattern _____

Quilted by: _____

Category

____ Bed quilt Size: crib lap twin full queen king

____ Wall hanging

____ Christmas quilt

____ Miniature quilt

____ Quilt made by or for a child

____ Clothing & miscellaneous

____ Workshops & special guild projects

____ 2017 Challenge - Reuse, Recycle, Repurpose

____ 2018 Challenge - 30th Anniversary Pearls

Description of Quilt - Write a short paragraph (30 words or less) describing your quilt, what inspired you, source of design, and other information that will interest the viewer. Use the back of the page if needed.
PLEASE PRINT CLEARLY.

For sale? Yes _____ Price \$ _____ No _____

If hanging space is not available, may we drape your quilt? _____ Yes _____ No

Quilt Show Insurance Waiver and Assumption of Loss

The insurance policy that the guild provides is mainly liability and provides minimal protection against property damage, loss or theft. If you feel your quilt is of special value, we encourage you to submit a copy of an appraisal with your acquisition form. Your quilt may already be covered by your homeowner's policy. We will handle the entries with great care and will watch guests to prevent the public from handling them. Nevertheless, we cannot accept financial responsibility for anything that may happen to the property of the entrants.

By signing below you acknowledge recognition of the above and your assumption of risk. You further agree to release Courthouse Quilters Guild from any liability for loss, damage, theft, injury or destruction of any article entered by you in the Courthouse Quilters 2018 Quilt Show.

PLEASE NOTE: By signing this form, you agree that the Hanging Committee is solely responsible for accepting or not accepting your quilt, and solely responsible for assigning the appropriate exhibit space for your quilt.

Quilt value _____ (If left blank, a value will be assigned by guild)

SIGNATURE: _____ Date: _____

Quilt Receipt: To be signed by a GUILD representative upon receipt of article DROP OFF:

**Tuesday, October 2, 2018 between 9 am - 7 pm
at Darcy Lodge**

PICK UP:

**Sunday, October 7, 2018, between 6 pm - 7 pm
At Prallsville Mills**

WITH VALIDATED RECEIPT ONLY

COURTHOUSE QUILTERS 2018 QUILT SHOW

CLAIM TICKET

(Required to pick up entry)

Exhibitor name _____

Quilt name _____

Received by _____

(Authorized Guild Representative)

ENTRIES MUST BE PICKED UP BY 7PM ON SUNDAY, OCTOBER 7TH

(No quilts will be released until the entire show has been taken down organized for return)