Montana Winter Fair Quilt and Fiber Arts Show Entry

Exhibitor's Na	me:					
Phone: ()		email:			
Address:				City	State	Zip
	•	•	e 🔲 Youth, 7th - 12t e or older) 🔲 Vintage	•	ars of age and older)
Quilt/Art Owr	ner's Name	::				
Title of Piece:	Fitle of Piece: Completion Date:					
Quilt Pieced b	y or Art M	aker:				
Quilted by: _						
☐ Long a	rm free mo	otion [Long arm computerize	ed 🖵 Hor	ne Sew Machine	☐ Hand quilted
Size: Width_	Le	ength				
Block or Patte	ern Name:_					
Why did you	choose it?					
Techniques u	sed:					
Reason for ma			comments:			
(use back of fe	orm if nece	essary)				
Disclaimer: I have read the show entry rules and I understand the every precaution will be taken to protect my quilt/art entry and to MT Winter Fair, Lewistown Art Center and its representatives can be held responsible for loss, damage, theft, injury, destruction, or acts beyond their control. I give my permission for my entry to be photographed.					*A maximum of 5 e will be accepted*	entries per person
Entrant's Sign	ature:					

Date: _____