

2016 IPM Quilt Competition Entry Form

"A Fresh Taste of Quilting"

One form per entry. Entry forms must be received by April 15, 2016.

Exhibitor Name: Exhibitor date of birth (Youth only):	Category: Quilt Name:
Mailing Address:	Measurements (in inches): Height: Width: Perimeter: Hanging Sleeve: Y / N
Email: Telephone: Cell Phone (optional):	Brief Quilt Description: (main colours, pattern, etc.) Photo Attached: Y / N
Design or pattern acknowledgements:	Top made by: Quilted by: (Use reverse if necessary) <input type="checkbox"/> Hand <input type="checkbox"/> Domestic Machine <input type="checkbox"/> Longarm <input type="checkbox"/> Computerized Longarm
Date Completed: Approximate Value: \$	Entry Fee of \$10/entry enclosed: Y / N Cheque # _____ Amount: \$ _____ Does this cheque cover multiple entries: Y / N
<p>In submitting this entry, I am verifying that I have read, and agree to, the IPM 2016 Quilt Competition rules as issued. Further, I consent to the use of images of my work for purposes deemed appropriate by the 2016 IPM, as well as photography by attendees of the show and members of the media. For more information, please contact info@ipm2016.com or 519-510-2016.</p> <p>Exhibitor Signature: _____ Date: _____</p>	

Mail one COPY of the entry form, with Entry Fee (per entry) to:

Renske Helmuth, Chair IPM 2016 Quilt Committee
 6833 Wellington Road 9, R.R. #3 Moorefield, ON N0G 2K0