



DATE REC'D: ___/___/___

4" x 6" Photo Submitted: _____

Entry form may be mailed, or, hand delivered.
NO ENTRY FORM will be accepted after August 17, 2020.

ENTRY #: _____

Please note - Entry Quilts will be received at First Presbyterian Church, 10 W Liberty Street, York, SC on September 15, 2020 between the hours of 11:00am – 1:00pm. No exceptions.

ENTRY FEE: \$8.00 (Member) \$15.00 (Non-member) PAYMENT: Cash: \$ _____ Check #: _____ Credit: () YES

Make check payable to York County Quilters Guild, Inc Mail to Sherri Turevon, PO Box 36308, Rock Hill, SC 29732

Entrant's Name: _____

Home Phone: _____ Cell Phone: _____

Email: _____

ABOUT YOUR ENTRY . . . QUILT NAME: _____

QUILT SIZE (in inches): (Width - not to exceed 90") _____" X (Length) _____" Year Completed: _____

CONSTRUCTION TECHNIQUES used in quilt top: Check all that apply . . .

Piecing techniques:

- () Hand Piecing
- () Machine Piecing
- () English Paper Piecing
- () Foundation Piecing
- () Strip/String Piecing
- () Other: _____

Applique techniques:

- () Hand Applique
- () Machine Applique
- () Reverse Applique
- () Fusible Applique
- () Decorative - Blanket, Buttonhole, etc
- () Other: _____

Novelty techniques:

- () Biscuits
- () Cathedral Window
- () Dimensional Applique
- () Folding
- () Gathering/Ruching
- () Yo-Yo

EMBELLISHMENTS: () YES () NO

EMBELLISHMENT TECHNIQUES used in the quilt top: Check all that apply . . .

- () Attachments (beading, charms, buttons, etc)
- () Embroidery
- () Ink Drawing
- () Painting
- () Photography / Photo Transfer
- () Other: _____

MATERIALS:

- () Beads
- () Buttons
- () Charms

THREADS:

- () Cotton
- () Wool
- () Other: _____

DESIGN SOURCE: Mark all that apply and list sources; where requested . . .

- () ORIGINAL . . . No pattern used and is not a copy of a previous work or design of another person
- () PATTERN . . . Pattern(s) Name: _____
- () KIT (Pattern and fabrics selected by an entity other than Entrant; for example a Store, Instructor, etc)

QUILTING METHOD: () HAND () MACHINE () BOTH

QUILTED BY: () SELF Do you quilt professionally (charge as a service)? YES () No ()

() OTHER: (Name or Business) _____

CATEGORY: TRADITIONAL: () Pieced () Applique/Mixed () Miniature
 (Choose one) NON-TRADITIONAL: () Art/Abstract () Art/Realistic
 SPECIALTY: () Modern () Group () Other Techniques () First Entry

NOTE: Only one submission per Category. No exceptions – thank you!

By entering the piece described above, I agree to abide by the rules and decisions of the Judge, the Quilt Show Committee, and the YCQG Board. While the utmost care will be taken of the quilt, I understand neither The Quilt Show Committee, YCQG, Inc or its Members will be held responsible for loss or damage to my quilt while in its possession. I hereby grant YCQG, Inc permission to photograph my quilt for use on a Show CD and/or for promotional efforts.

Signature: _____ Date: _____