

QUILTS WITH A STORY SUBMISSION FORM

NAME OF PERSON SUBMITTING QUILT AND FORM: \_\_\_\_\_

NAME AND/OR BRIEF DESCRIPTION OF QUILT

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Please attach a small color picture of the quilt attached to this form.

SIZE OF QUILT: \_\_\_\_\_

QUILT MAKER: \_\_\_\_\_

QUILT OWNER: \_\_\_\_\_

THE YEAR THE QUILT WAS MADE: \_\_\_\_\_

QUILT STORY IN YOUR OWN WORDS:

Please include any special points of interest—why the quilt was made and for whom; tell the story behind the quilt. Give details if you have them—funny or something sentimental that makes this quilt special. Add whatever you think the audience would like or need to know about your special quilt.

SUBMIT TO PEGGIE MACKENZIE OR JOAN CARRELL BY APRIL 15, 2024

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