

**SHADOW MOUNTAIN
QUILTERS
PINS AND NEEDLES
SHOW**

"NEW DIRECTIONS"

March 27 & 28, 2020

Official Use Only	ENTRY NUMBER		
DATE:	CASH	CHECK	3 rd PLACE
WAIVER	REC'D STORY	EMAILED COVER	PLACARD MADE

QUILT ENTRY FORM

Categories: H, S, M, L, X, B, QHA, QAC
ONE FORM PER ENTRY - Please PRINT clearly

ENTRANT NAME			PHONE NO. ()
MAILING ADDRESS			
EMAIL			
QUILT TOP MADE BY (IF OTHER THAN ENTRANT)			
NAME OF QUILTER:			
QUILT TITLE			
CATEGORY NO.	FINISHED SIZE:	Wide:	Tall:
METHOD OF QUILTING: (CHECK ONE)	<input type="checkbox"/> LONG-ARM COMPUTER AIDED OR EMBROIDERED	<input type="checkbox"/> LONG ARM HAND GUIDED	<input type="checkbox"/> STATIONARY MACHINE <input type="checkbox"/> HAND
IS THIS A THEME ENTRY:	<input type="checkbox"/> YES <input type="checkbox"/> NO	IS THIS ENTRY A KIT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IS THIS ENTRY FOR SALE?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT IS THE PRICE? \$	
If your item is for sale, we will post your phone number on the entry so that a buyer may contact you.			
We will prepare an information sheet for your entry for viewing by those attending the show. Please give us a short story about your entry, such as who it's for, why you chose to make it, pattern source, etc. PREFERRED: EMAIL YOUR STORY TO US. Please put "SMQ Quilt Story" in the Title Line. In the body of the email, list your name, title of your work, and story. One email is fine for multiple entries. Email to SMQDarla@gmail.com. _____ Check here if you are emailing your story. If not, and you need more space, please use the back of this form.			
I HAVE READ AND AGREE TO THE RULES AND ENTRY INFORMATION FOR THIS SHOW (Required)			
Signed:		Date:	

INSURANCE WAIVER AND ASSUMPTION OF LOSS

PINS AND NEEDLES QUILT SHOW

Your entries may already be protected by your homeowner's policy. The insurance policy that covers Shadow Mountain Quilters is a personal injury liability policy only. It does not provide any protection against property damage, loss, or theft. We will handle the entries with great care and our hostesses will watch quilt show attendees to prevent the public from handling them as much as possible. Therefore, we ask that all entrants sign the following statement as evidence of their recognition and assumption of risk, and return this form with your entry.

“By signing this statement, I expressly agree to release Shadow Mountain Quilters and their respective agents and members from all liability for any loss, damage, theft, injury, or destruction to any article entered by me in the Pins & Needles Show. I understand and assume that I bear the risk of all uninsured loss to my own property and it is up to me to properly insure against any and all risks if I so choose.”

Signature: _____ Date: _____

Print Name: _____

PLEASE RETURN THIS FORM WITH YOUR ENTRY. ONLY ONE WAIVER FORM IS NEEDED IF YOU ENTER MORE THAN ONE ENTRY.