

## MISSOURI QUILT FESTIVAL Quilt Donation Form



## **Maker Information**

Individual		
Made By:	<del> </del>	
Maker's Address:		
Maker's City, State, Zip:		
Maker's email:		
Church		
Church Name:		
Church's City, State, Zip:		
Contact Phone:		
Quilt Information:		
Size:	inches <b>X</b>	inches
Type of Quilting (circle one)	Hand	Machine
Type of Binding (circle one)	Hand	Machine Judging Category (circle one):
Quilt Title/Name:		
		Estimated Material cost: \$
Pattern/Description:		

## For Quilt Drop off or Pick up information please visit www.mbch.org/Missouri-Quilt-Festival

## **SPONSORED BY:**







