2026 Strawberry Festival
Quilt Donation Form

Maker Information

Made by: _____

Quilted by (if different): _____

Maker's Address: _____

City _____ State _____ Zip _____

Church: _____

Quilting Group Name: _____

Contact Person: _____

Contact Phone: _____

Contact Email: _____

Quilt Information

Type of Quilting (circle one): Hand Machine

Category (circle one): Baby Baby Embroidered Baby Reprinted

Appliqued Hand Embroidered Machine Embroidered

Pieced Whole Cloth Pre-printed

Pattern/Description _____

_____

_____

_____

_____

Border/Colors: _____

Lining Color: _____

Binding Color: _____

Additional Information: _____

Estimated Cost of Materials: _____

Estimated # of man hours invested: _____

For Office Use Only: Size _____ X _____