



Warwick Valley Quilters' Guild
"Stars of the Valley" Quilt Show 2024
REGISTRATION FORM

Deadline – September 7, 2024

Use separate form for each quilt (form may be photocopied)
Please **PRINT** all relevant information.

Please read the pages titled "REGISTRATION INFORMATION" and "CATEGORIES" before completing this form.

Name: _____

Address: _____

Phone: _____ E-mail: _____

WVQG Member? Yes _____ No _____ Quilt to be judged? Yes _____ No _____

Quilt Title: _____

Category Number: _____ (Refer to Registration Information)

Quilt Dimensions in inches: Height: _____ inches Width: _____ inches

Year Made: _____ Made By: _____

Quilted By: _____ (If quilted by someone other than the maker, provide the name of the quilter, so that s/he can be included in the catalog.)

Please check appropriate space: Longarm _____ Stationary/Domestic Machine _____ Hand Quilted _____

Design Source: Traditional _____ Original Design _____ Commercial Pattern (specify) _____

Does your quilt contain **computerized quilting**? If so, check here _____. Does your quilt contain **computerized embroidery**? If so, check here _____.

In your brief description for display (25 words or less), please include your design source: class/teacher's design/pattern designer/original design, etc., inspiration and any previous awards:

Before the show this quilt will be: _____ hand-delivered OR shipped via _____ USPS _____ UPS _____ FedEx

After the show this quilt will be: _____ picked up in person OR returned via _____ USPS _____ UPS _____ FedEx

Refer to Registration Information for details on Quilt Shipping and Quilt Return

Would you like to have your quilt appraised? _____ YES

Quilt appraisals are available by AQS certified appraiser Karen Dever. A separate check for \$60 for a written appraisal, or \$35 for an oral appraisal, made payable to Karen Dever, must be included along with your registration check.

Deadline for receipt of registration form and fee is **September 7, 2024**.

For each quilt, return this form, photo of quilt (**do NOT use staples**), registration fee (\$12 for members, \$15 for non-members, check made out to **WVQG**), and one #10 business-sized self-addressed stamped envelope to: **Judy Veltidi, 35 Van Orden Avenue, Suffern, NY 10901**.

Signature _____

Date _____