

**QUILT DESCRIPTION & REGISTRATION**  
**CABIN FEVER QUILT SHOW**  
**YEAR \_\_\_\_\_**  
**S & B QUILTER'S – P.O. Box 803 Hotchkiss, CO 81419**

**PLEASE PRINT ALL INFORMATION**

\*

ENTRY NUMBER \_\_\_\_\_ Name of entrant \_\_\_\_\_ Phone # \_\_\_\_\_

(circle one)      Adult      Youth( 18 and younger)

NAME or PATTERN OF QUILT \_\_\_\_\_ Antique    yes    no (circle one)

NAME OF **MAKER** \_\_\_\_\_

NAME OF **QUILTER** \_\_\_\_\_

Hand Appliquéd \_\_\_\_\_

Machine Appliqued \_\_\_\_\_

Hand Quilted \_\_\_\_\_

Machine Quilted \_\_\_\_\_

Hand Pieced \_\_\_\_\_

Machine Pieced \_\_\_\_\_

Computer Quilted \_\_\_\_\_

**BRIEF STORY OF QUILT (25 WORDS OR LESS)**

Include anything you think is important for the public to know about your quilt. Consider such things as date quilt was made, was it made for someone special, quilting techniques used, type of fabric used, etc. Give personal remarks. Reminder – if your quilt was made from a kit or a purchased pattern, please give credit to the designer or company.

PLEASE **PRINT** and use **COMPLETE SENTENCES!** Carefully **check the SPELLING**

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Please check:

\_\_\_\_ Large Quilt      Length \_\_\_\_\_ x Width \_\_\_\_\_

(king, queen, full)

\_\_\_\_ Small Quilt      Length \_\_\_\_\_ x Width \_\_\_\_\_

(twin, crib/baby, throw)

\_\_\_\_ Wall Hanging      Length \_\_\_\_\_ x Width \_\_\_\_\_

\_\_\_\_ Table Runner      Length \_\_\_\_\_ x Width \_\_\_\_\_

\_\_\_\_ Other      Length \_\_\_\_\_ x Width \_\_\_\_\_

(clothing, home accessories, totes) \_\_\_\_\_

**\*\* The category you select is how the entry will be registered.**

Signature \_\_\_\_\_

This form must be completed and returned to the S&B registration committee on or before deadline date of

\_\_\_\_\_. **No Exceptions!**