

# Pieces of Magic

Registration Form - 2017

cut off date for entires is April 15, 2017 (NO EXCEPTIONS)

Your Name:	
Quilt Name:	
Quilt Size (width X length)	

This quilts is:

(Select type)

Bed Quilt, Lap Quilt, Wallhanging, Challenge, Red & White

Photo:	Actual Photo	Please ensure that your name and the name of your quilt are written on the back of the photo
	Digital	(document name of photo being submitted)
Description: (Information for the display card. Please try and limit to 250 characters)		

**The following is mandatory information, please make sure it is filled out before submitting.**

Source of inspiration (ie pattern, class, photo etc. or your own <b>original</b> design)	
Quilted by:	

I wish to sell this quilt	Yes/No		Asking Price:	
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**When bringing your quilt for the show, please be sure that it has:**

***Hanging sleeve***

***Hanging Rod (with your name and the quilt name written on it)***

**Please email this completed form and photo to: [gwentracey@execulink.com](mailto:gwentracey@execulink.com) or mail to Gwen Tracey, 15212 Putnam Road, Springfield, Ontario N0L 2J0**