

2019 Quilt Acceptance Dates

Tuesday March 5th from 5—7pm
Wednesday March 6th from 10—2pm
Saturday March 9th from 10—2pm

Exhibitor's Agreement and Information

Name ______ phone _____

Email address		
I am entering	_ quilts and have completed an exhibit for	m for each.
	Statement of Responsibilities	
I state that each of the number securely attach	items I am submitting is clean/odor free and ed.	has my name and phone
I understand that the M	lilwaukie Center Quilt Show will:	
1. Observe check-in and	I check-out procedures for receiving and retu	urning my items;
2. Handle my items in the	ne course of show set-up and break down wi	ith care;
3. Monitor the display of	luring the show hours; and	
4. After hours, secure items in a locked room and building wired with an alarm system.		
Under these conditions	, I agree to display my item(s) for the full dur	ration of the show from
9 a.m4 p.m. Friday, Ma 5-6 p.m., Sat. March 23	arch 22 and Saturday, March 23. I agree to p s, 2019.	ick up my quilt between
I agree that photograph sonal and promotional a	is and videos taken during the program activactivities.	ities may be used for per-
Signed:	Date _	
	De Completed By Quilt Committee QUILT(s) RECEIPT	Received by
At the Milwaukie Center	Exhibitor's name	
March 22 & 23, 2019	Phone	
Bed quilts Wall Hangings		