

Ohio's Amish Country Quilt Festival
Quilt Drop Off Form

Please Print

Exhibitor's Name: _____

I wish to enter this quilt and agree to abide by the judges' decisions. *Each quilt must be accompanied by its own Quilt Entry Form and Quilt Drop Off Form.*

Signature of Entrant
**Signature is required for acceptance of the entry*

Date

Signature of Shop Representative Accepting Entry

Date

I plan to pick up my quilt

_____ at the Mt. Hope Event Center on Sat., Sept. 11, 5pm - 6pm

_____ at Lone Star Quilt Shop Sept. 13 - 18, 8am - 5pm
7700 CR 77, Mt. Hope, OH 44660

Quilt Claim Ticket

This ticket must be presented when picking up quilt(s).

Quilts may be picked up at the Mt. Hope Event Center on Sat., Sept. 11, 5pm - 6pm or Sept. 13 - 18, 8am - 5pm at Lone Star Quilt Shop. You must present your claim ticket when picking up your quilt. *Each quilt must have its own Claim Ticket.*

Exhibitor's Name: _____

Phone: _____ e-mail: _____