



Ocean Waves Quilt Guild 2019 Show

Birds, Blooms & Butterflies

April 26-27, 2019

Sussex Academy, 21150 Airport Rd., Georgetown, DE

CHALLENGE REGISTRATION

PARAMETERS

Your challenge piece must be your own design (no patterns please.) There is no entry fee or judging fee. All challenge quilts will be judged by Viewers' Choice ballot, and ribbons awarded based on the number of votes received.

- The quilt should measure 8" wide by 36" long.
- You must use at least 3 of the show colors: yellow, teal, pink, purple and lime green. You can add other colors as well.
- You must use at least 1 of the themes: birds, blooms, or butterflies. You can use 2 or all 3.
- Your piece must be embellished in some way: beads, bows, trims, etc.
- No hanging sleeve is required.

Quilts will be collected April 23, 2019 from 9-11 a.m. at Sussex Academy and can be picked up Saturday, April 27, 2019 from **4:30-5 p.m.** at Sussex Academy. See the quilt registration instruction sheet for drop off and pick up details.

Entrant Name _____

- All Challenge Quilt participants must be OWQG members.
- Registration Form must be received by **February 4, 2019**.
- There is no registration fee or judging fee for Challenge quilt entries.
- Write your name on the back of **two (2) color 4 x 6 photos** of each item you are registering and attach them to the upper left corner of each form.
Photo(s) will NOT be returned; required for insurance.
- Forms may be submitted to Barbara Wood or Ginny Brennan at guild meetings
- Or mailed to: **Barbara Wood, 34942 Ensign Crest, Lewes, DE 19958**
- For Challenge questions contact Pat Morrissy, 302-329-9153
fabricaddict@comcast.net
- For form questions, contact:

Barbara Wood: bpwood418@aol.com or

Ginny Brennan: ginbrennan@gmail.com

For Registrar's use:

Date rec'd: _____

2 Photos: ____ Y ____ N

Entered in Excel: _____

E-mail confirmation sent:

Entry #: C _____

Continue to Page 2.

OWQG Quilt Show 2019 Challenge Quilt Registration

Entrant Name _____ Phone: _____

Email (confirmation of received form will be sent): _____

Quilt Name: _____

Quilted by: _____

PIECING

Check all that apply:

_____ Hand pieced

_____ Machine pieced

_____ No piecing

APPLIQUE/EMBROIDERY

Check all that apply:

_____ Hand appliqued

_____ Machine appliqued

_____ Hand embroidered

_____ Machine embroidered

QUILTING

Check all that apply:

_____ Hand quilted

_____ Machine quilted, domestic or stationary machine

_____ Machine quilted, long arm or moving machine

Other techniques/embellishments used:

_____ Yes this is an original design by Entrant.

CONFIRMATION OF LIMITED LIABILITY INSURANCE COVERAGE

The Ocean Waves Quilt Guild purchased an insurance policy for those items to be entered in the quilt show. Insurance will cover quilt drop-off to pick-up, and states: Each quilt will be insured for **not more than \$300.00** and other items for **not more than \$100.00**. If you require additional coverage, you must obtain it at your own expense.

ACKNOWLEDGMENT AND WAIVER ACCEPTANCE

By signing this form, I acknowledge limitations of insurance provided and have accepted the responsibility to provide additional insurance coverage that I deem necessary. Further, I also agree to hold harmless the Ocean Waves Quilt Guild for any liability other than covered by the applicable insurance provided.

I acknowledge that my quilt/item is in good condition – clean, smoke-free, odor-free and meets size requirements. Ocean Waves Quilt Guild reserves the right to not display a quilt/item due to poor condition or noncompliance with Quilt Show requirements.

I grant permission for my quilt to be photographed and those photos to be used for promotional purposes. I understand that I will be credited as the owner/creator of the quilt if used for promotion of the show.

_____ Date _____

Signature of Entrant

It is strongly suggested that you make copies of all your completed registration forms to keep for your records.

Continue to Page 3.

OWQG Quilt Show 2019

CHALLENGE DISPLAY CARD INFORMATION

What you enter here will appear *on your quilt's display card.*

Please print or attach a typed version of this page.

Please write the text you would like to appear for your entry ***on your quilt's Display Card.***

You can include inspiration for your quilt.

Entrant Name _____

Quilt Name _____

Quilted by _____

Artist's Statement: **LIMIT 100 words.** Entries exceeding the limit may be edited.

Print all pages, sign and date page 2, attach 2 photos, attach check if quilt is to be judged. See page 1 for mailing instructions.