



**CLAIM CHECK
RECEIPT (please
print)**

Pick up Sunday, April 7, 2024 from
4:30-5:30 pm at the Clocktower
**Bring this receipt with you to pick up
item.**

Name: _____

** Item Name: _____

**DO NOT DETACH THIS RECEIPT. You
will be given receipt at Check-in on
Thursday, April 4, 2024**

To be completed at Check In:

ENTRY NUMBER _____

QUILT LABEL (please print)

Detach and **sew** to lower right corner of
quilt back. Bring to quilt intake at 1530 London
Circle on Thursday, April 4, 2024, 10 a.m. to 5 p.m
OR to General Meeting, Thursday, April 4, 6:30
pm-8:30 p.m.

Name _____

Phone _____

**Item Name _____

Dimensions: W _____ x L _____

To be completed at Check In:

ENTRY NUMBER: _____

Entry Number: _____



CSS 2024 Quilt Show Entry Form

Name _____

Address _____

City _____ Zip Code _____

** Item Name: _____

** ITEM NAME must be same on this page and the Story Page.

Group or Class _____

Year item was made: _____ Dimensions of item in inches W _____ x L _____

Priority Level : If entering more than one item choose the Priority Level based upon which items you want displayed first. Each separate entry must have a different choice.

Circle your choice for this quilt:

1st choice 2nd choice 3rd choice 4th choice 5th choice 6th choice 7th choice

INCLUDE A PHOTO OF THE ITEM WITH THIS FORM.

It can be a photocopy of the finished item or an in-progress-item.

Please create your quilt story on the separate form