2019 REDBANK VALLEY HISTORICAL SOCIETY QUILT SHOW INFORMATION AND ENTRY FORM QUILT ID#____

Friday, October 11, 2019 - 10 AM to 7 PM and Saturday, October 12, 2019 - 10 AM to 4 PM

Theme: Voices in Fabric. Redbank Valley Historical Society (RVHS) remembers history through our "Voices From the Valley" publications and historic prints. Quilts, through their "Voices in Fabric," tell the story of what inspired their creation. They evoke feelings, thoughts and memories. Enjoy the show, with vendors and demonstrations, during the full color of Autumn in the Redbank Valley, located on the Redbank Valley Trail in New Bethlehem, PA 16242, an hour East of Pittsburgh via SR 28/66. Although not judged, viewers' choice ribbons will be announced beginning at 3 PM on Oct. 12, 2019.

DEADLINE TO SUBMIT THIS FORM: September 28, 2019. Forms received after this date will not be guaranteed a place. Due to space limitations, quilts are accepted on a 1st come, 1st served basis. **PLEASE USE ONE FORM FOR EACH ENTRY.**

Delivery: Quilts must be delivered to The Gallery at New Bethlehem Town Center, 419 Arch Street, New Bethlehem, PA 16242 between 6:00 PM & 8:00 PM on Tuesday, October 8 or 9:00 AM-12:00 PM on Wednesday, October 9, 2019.

Pick Up: Quilts must be picked up between **4:30 pm and 6:00 pm on Saturday, October 12**. If you are unable to pick up your own pieces, please make other arrangements before the end of the show by calling Cindy Morgan at 814-221-6225.

HOLD HARMLESS AGREEMENT: By my signature below, I agree to abide by all conditions stated on this entry and information form. I agree to permit the display of my entry and grant RVHS, Redbank Renaissance and The Gallery at New Bethlehem Town Center the right to photograph my entry for promotional purposes, including print, website or video. Although RVHS will have someone present at all times while the Quilt Show is open to the public, I understand and agree that RVHS, Redbank Renaissance, Inc., The Gallery, New Bethlehem Town Center and their volunteers will not be responsible for my safety or the safety of my entry and that no responsibility for loss, damage or injury will be assumed by them. The placement of the quilts will be at the discretion of the Redbank Valley Historical Society.

NAME	PHONE #			
ADDRESS				
EMAIL ADDRESS				
QUILT NAME	PATTERN NAME			
Name of person who completed the quilt top	Year:			
Technique (check all that apply): Hand pi	ecing Machine piecing _	Hand Applique	e Machii	ne Applique
Hand Embellished/Embroidery Ma	chine Embellished/Embroidery	Other		
Name of person who quilted the quilt:		Y	ear:	
Name of person who quilted the quilt: Technique (Check all that apply): Hand (Quilting Machine Quilting	Size:	width"	length"
Given space limits, will you allow us to fold in Category (Check One)	from sides to show as much of c	lesign as possible?	Yes	No
Bed quilt/large wall hanging	Lap/crib quilt/medium hanging	Wearable:	jacket, vest, p	ourse, etc.
Doll quilt/small wall hanging/miniatu	re Other: tote, pillows, tal	ole decoration _	Vintage qu	uilt
Did you use a published book or pattern to cr	eate quilt? No Yes. If y	es, provide credit:		
Your Quilt's Story for label in 60 words or les	s: What inspired the quilt, made	e for whom, any sp	pecial meanin	g or special
techniques used should be noted. RVHS reser	ves the right to edit for clarity o	r length.		
Is this entry available for sale? Yes No sales tax which will be added to price. I agree				
Signature (Required)	Date			
Please return this form to Cindy Morgan, Pres	ident of the Redbank Valley Hist	orical Society, 248	3 Walker Flat F	Rd.,

Mayport, PA 16240 or to <u>lucindamorgan49@gmail.com</u>, no later than the due date, September 28, 2019. You may call 814-221-6225 or email Cindy with any questions or visit the website at <u>https://redbankren.org/history</u>.

IMPORTANT: You will be given this portion when you deliver your quilt. It will be your receipt to be presented when you collect your quilt at the end of the show from 4:30 pm to 6:00 pm ONLY on Saturday October 12, 2019.

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The Gallery at New Bethlehem Town Center, 419 Arch Street, New Bethlehem, PA 16242

QUILT ID# _____ (to be assigned by RVHS)

YOUR NAME (Please print) ______

QUILT NAME _____

YOUR SIGNATURE: _____

IF OTHER THAN YOU, NAME OF PERSON PICKING UP QUILT/ENTRY (Please print)

SIGNATURE OF PERSON WHO PICKED UP QUILT/ENTRY: _____