**PLEASE** **ATTACH** **THIS** **FORM** **TO** **THE** **OUTSIDE OF THE SACK** **CONTAINING** **YOUR** **QUILT(S).**

**Deliver** **your** **quilt(s)** **to** **the** **Church** **Office** **Tuesday--Friday,** **9** **am--noon.** **Please** **have** **your** **quilt(s)** **delivered** **by** **the** **Sunday** **prior** **to** **Quilting** **Workshop**

**ZION** **MENNONITE** **QUILTING** **WORKSHOP**

**COLLECTION** **RECEIPT**

NAME:

ADDRESS:

CITY: STATE: ZIP:

PHONE:

**Names** **of** **Quilts**

1.

2.

3.

4.

5.

6.

7.

I hold the Zion Mennonite Church harmless for damage or the disappearance of quilts and related items while they are on display for the Quilting Workshop.

Signature of owner\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Persons other than owners picking up quilts after the workshop will sign here:

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Quilt Registration

Name of Quilt:

Made by:

Year: Size:

Owned by:

Comments:

***Please*** ***complete*** ***two*** ***forms*** ***per*** ***quilt.*** Give one copy to the Church Office and attach the other to your quilt. Deliver your quilt(s) to the Church Office by the Sunday prior to Quilting Workshop.

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