

FREEMAN ACADEMY AUXILIARY  
QUILTFEST ENTRY FORM

Sterling Hall, Freeman Academy Campus, Freeman, SD

(One Entry Per Form)

Owner Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Check one:

Bed Quilt                       Baby Quilt

Wall Hanging                       Challenge

Check whatever applies:

Hand Quilted                       Machine Quilted                       Tied

Hand Appliqué                       Machine Appliqué

Name of Quilt \_\_\_\_\_

Size:    Width \_\_\_\_\_                      Length \_\_\_\_\_                      Year Made \_\_\_\_\_

Made by \_\_\_\_\_

Address \_\_\_\_\_

Description/Remarks

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional information will be mailed. Please enclose a **SELF-ADDRESSED STAMPED ENVELOPE** and the completed form. **Mail by June 1** to Quiltfest, Box S, Freeman, SD 57029.