

BEE by the RIVER! 2019

Special Exhibit Registration

Do not write in this box, please.

Quilt Number: _____

Please print the following information for EACH quilt/item you are submitting:

Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Quilt Size: (inches) width: _____ height: _____

Quilt/Item Name: _____

Brief description, history, maker, pattern, any pertinent information:

Release:

I, the undersigned agree to the following:

I release the Twin Rivers Quilters Guild and the New Bern Riverfront Convention Center from any liability for damage or loss of the item listed above.

Signed: _____ Date: _____

Do not remove this portion: **Special Exhibit Quilt Receipt**

Bring this receipt with you to pick up your item after the quilt show. No items will be released without a receipt.

Name: _____ Number: _____

Quilt/Item Name: _____