



Quilting in the Blackstone Application

Name _____

Street _____

City _____

State _____

Zip _____

Phone _____

E-mail _____

By signing below, I understand and accept the terms and conditions of the John H. Chafee Blackstone River Valley National Heritage Corridor Quilt Show.

Applicant Signature _____

Date: _____

For official use only:

Receipt Number: _____



Quilting in the Blackstone Quilt Show

Name of Owner

City of Owner

Age of Quilt

Description of Quilt
