



Quilt Show Advance Shipment Form

This form must be completed and included in your shipment.

Owner's
Name: _____

Name of Exhibitor (if different than name listed above):

Exhibitor's Name: _____

Address: _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

Number of Quilts in Shipment _____

Are quilts pre-registered? Yes No

Return Postage Included Yes No

Return Shipping Instructions _____

The quilt(s) will be picked up at the close of the show by:

If being picked up after the show on Sunday, would you like your packing box saved and available for you to pick up during check-out?

Yes No

Address shipment to:

Sauder Village Quilt Show, 22611 State Route 2, Archbold, OH 43502