



CQA/ACC Rosette Recipient

Information form

GUILD MEMBERSHIP # _____

SPONSORING GROUP OR GUILD _____

NAME OF QUILTING EVENT: _____

DATE(S) OF EVENT: _____

CONTACT PERSON _____ email _____

Address _____

NAME OF ROSETTE RECIPIENT _____

Address _____

Background information about the Quilter:

(how long has recipient been a quilter, something about her/his background and family, etc.)

TITLE OF QUILT: _____

SIZE: _____

Description of Quilt:

techniques used, fabric, etc. If you need more space, please use reverse side of form

ORIGINAL DESIGN? _____ PATTERN? _____

Inspiration:

CQA/ACC has a stated policy of upholding copyrights and respecting the work of fibre artists in general. If this quilt drew on inspiration from, or is a copy of someone else's work, credit must be given in order to publish this item in the CQA/ACC Newsletter. We ask all CQA/ACC members to respect this policy. You must have permission to use pattern from designer and publisher. Pattern/Source/Designer credited in order to be published. Thank you!

Quilted By: (if different from the maker) _____

Reason for Award: (Best of Show, Viewers' Choice, etc.) _____

Please return this form within a month of the show.

If mailing: Include a photograph. Please do not write on the back of photographs as even the faintest markings can do harm to the photograph. Write information on a separate piece of paper and wrap the photo in the paper. Please do not use paper clips, tape or staples.

Mail to: Vivian Kapusta, 12490 Ansell St., Maple Ridge, B.C. V4R 1L4

You can also send by email Photo: jpg. Format. Form: scan and attach. secretary@canadianquilter.com