

SHOW AND TELL INFORMATION FORM

Thank you so much for agreeing to share your quilt at the DQN Meeting.

Please provide us with the following information:



Name:

Contact Information (include phone number and email address)

Quilt Name:

Quilt Designer:

Who quilted your quilt?

Genre:

Artist's Statement: What would you like to share about your quilt? (what inspired you to make it, was it a special gift, what techniques did you include, etc.) This is your artist's statement.

Fill out this form, save it with your name, and return it to Diane Fenstra-Jenks
vendors.diane@dqnv.org by the day before the meeting--April 29, 2026.