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| --- |
| 1. Name of Group:
 |
| 1. SA Quilters Group Membership Number:
 |
| 1. Name of Contact Person:
 |
| 1. Email address:
 |
| 1. Phone Number:
 |
| 1. Show or Exhibition dates and times:
 |
| 1. Show or Exhibition venue address:

  |
| 1. Judging venue address:
 |
| 1. Proposed Judging date:
 |
| 1. Expected Judging commencement and finishing times:
 |
| 1. Number of quilts to be judged:
 |
| 1. Categories and number of quilts per category:
 |
| 1. Special Awards
 |