DbarJ Quilts etc. Quilting Order Form

(One of these forms should accompany each quilt)

Date:_____

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Work: _____

Email: _____

Quilt Description: _____ **[Office Use]**

Size/Quilting Service: Top _____in. x _____in. _____ * _____

Backing: Supplied _____ We Provide at Your Cost _____ * _____

white _____off white(muslin)_____colored _____ *

Your backing should be 2" wider and 8" longer than top. *

Batting: Supplied _____ We Provide at Your Cost _____ * _____

cotton_____50/50 _____3.0 ____Dream Poly _____ Other_____ *

*

Quilting Design: _____ * _____

(Indicate primary and secondary choice) *

*

Special instructions: _____ * _____

*

Thread Choice: White ____ Color ($3.00 ex) ____Variegated ($10.00 ex) ____ * _____

What color: _____ *

Binding: Yes _____No _____ (figured by size of quilt) * _____

*

Other Charges: $7.00 for piecing backs, repairing seams, squaring backs * _____

*

If we do not piece the top we do not press the top. *

Helpful Hints: baste around the edge of pieced borders so they don't pull apart. Clip loose threads so they don't catch on the quilter foot. Check for open seams and close them. Make sure there are no foreign objects, like pins left in the quilt. Mark which is the top of your quilt and top of back.

Sub Total: _____

Tax: _____

Amount Due: _____