

2020 Women's History Quilt Block Submission Form 2020Quilt.org

Please complete this form and submit it with your quilt block. Please print.

Submitted By Who is submitting this 2020 Quilt block?		
Name*	·:	
Addres	ss*:	
Email:_	Phone:	
Website	e:Social Media:	
Subje	ct. What does this quilt block represent?	
	A person Name (Last, First Middle (Maiden):	
	Birth Date (actual or approximate): Death Date (actual or approximate):	
	A place Name (i.e. County Court House, Higgins Farm):	
	Location (address, city/town, state/province, country):	
	An Event Description (i.e. Women's Rights Convention, Treaty Signing, First Flight Across the Atlantic, etc.):	
	Date of Event (i.e. August 3, 1776; September 2004; Summer 1801; 1630's):	
	An Issue of Unfinished Business Please name the issue and give a reason why you believe it is unfinished (i.e. pay equity, because minority women are paid less than 60% of what white men earn, etc.):	
What	was your inspiration for this quilt block? Why did you choose this this subject (person, place, event, or issue)? How is this subject connected to you or your organization? How does this subject inspire/challenge you?	

	the art	ist(s) for this quilt block (if that is not the same as the person/group submitting it)?
	(5)	
		I you like us to know about your quilt block? e materials, design, or creative process that make this block unique/different.
Fee	el free to	attach a separate letter about your block if you would like to share more information.
Label you	r block	
Ple Sub	ase labe oject: (pe	l your block permanently (on the back, lower right corner) with the following information: erson, place, event, issue):
	ist: (if di	by: (name of person or organization, and your city/town, state/province, country) fferent from "submitted by" name)
Da	$\begin{bmatrix} Si \\ Si \end{bmatrix}$	ubject: SusanBrownell Anthony, 1820-1906 ubmitted By: National Susan B. Anthony Museum & House, Rochester, NY USA rtist: Carrie Chapman Catt ate: August 1, 2016
-	icture	(optional). In ted image of your block. An image of the artist or your organization may also be submitted.
		re(s) attached (please label with name(s), date, and location).
	nformat	tion will be kept confidential, but I understand that I will receive newsletters or occasional updates in Quilt Project. Also, I am willing to be contacted by the National Susan B. Anthony Museum & House
	Media	a people are interested in my/our story
	Some	one requests information about this block
	Pleas	e add me to the National Susan B. Anthony Museum & House general mailing list
	s not red	make a donation to support the 2020Quilt project, your gift will be used to care for and display the quilt. quired to submit a quilt block. senclosed (Please make the check out to the National Susan B. Anthony Museum & House)
documents I in such subr	submit, nissions.	the National Susan B. Anthony Museum & House is the owner of this block and any accompanying and I assign to the National Susan B. Anthony Museum & House any right, title, and interest I may have If I am submitting this block and documents on behalf of an organization, I verify that I have the right and behalf of that organization.
Signature		
Submit yo	ur blo	ck. Please send all 2020 Quilt submissions to the National Susan B. Anthony Museum and House:
		The National Susan B. Anthony Museum & House

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Rochester, New York 14608

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