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*: ____________________________________________________________

Address*: _______________________________________________________

Email: ____________________________________________________________ Phone: _______________________________________________________

Website: _________________________________________________________ Social Media: ________________________________________________

Subject. 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?

_________________________________________________________________________________________________________________________________________________________________________________________________________________________
Who was the artist(s) for this quilt block (if that is not the same as the person/group submitting it)?

Name(s): ____________________________________________________________

What else would you like us to know about your quilt block?
Describe the materials, design, or creative process that make this block unique/different.

____________________________________________________________________

Feel free to attach a separate letter about your block if you would like to share more information.

Label your block.
Please label your block permanently (on the back, lower right corner) with the following information:
Subject: (person, place, event, issue):
Submitted by: (name of person or organization, and your city/town, state/province, country)
Artist: (if different from “submitted by” name)
Date: ________________________________________________________________

| Subject: Susan Brownell Anthony, 1820-1906 |
| Submitted By: National Susan B. Anthony Museum & House, Rochester, NY USA |
| Artist: Carrie Chapman Catt |
| Date: August 1, 2016 |

Attach a picture (optional).
Please include a printed image of your block. An image of the artist or your organization may also be submitted.

☐ Picture(s) attached (please label with name(s), date, and location).

My contact information will be kept confidential, but I understand that I will receive newsletters or occasional updates in relation to the 2020 Quilt Project. Also, I am willing to be contacted by the National Susan B. Anthony Museum & House when:

☐ Media people are interested in my/our story
☐ Someone requests information about this block
☐ Please add me to the National Susan B. Anthony Museum & House general mailing list

If you would like to make a donation to support the 2020 Quilt project, your gift will be used to care for and display the quilt. A donation is not required to submit a quilt block.

☐ Check enclosed (Please make the check out to the National Susan B. Anthony Museum & House)

I acknowledge that The National Susan B. Anthony Museum & House is the owner of this block and any accompanying documents I submit, and I assign to The National Susan B. Anthony Museum & House any right, title, and interest I may have in such submissions. If I am submitting this block and documents on behalf of an organization, I verify that I have the right and authority to sign on behalf of that organization.

Signature ________________________ Date ______________

Submit your block. Please send all 2020 Quilt submissions to the National Susan B. Anthony Museum and House:

The National Susan B. Anthony Museum & House
16 Madison Street
Rochester, New York 14608

©National Susan B Anthony Museum & House, 2020 Quilt Submission Form, May 2017