

Quilt Intake Form

Please fill out all information. Please print and include in the package. I will contact once I have received your package.

* Indicates required question

1. First and Last Name *

2. Phone Number(s) *

3. Email Address *

4. Shipping Address *

5. Quilt Top Size and Description *

6. Quilt Backing Size and Description *

7. Batting *

Mark only one oval.

- Customer Provided
- Would like to purchase from Taylored Quilting

8. Trimming *

Mark only one oval.

- Do not need to trim
- Would like Taylored Quilting to Trim

9. Binding *

Mark only one oval.

- Customer will do binding
- Would like Taylored Quilting to make binding from customer provided fabric

10. Attach Binding *

Mark only one oval.

- Customer will attach
- Taylored Quilting will attach to front only
- Taylored Quilting will attach to front and back

11. Quilting Pattern Choice (if known - or write "undecided" if you would like help deciding) *

12. Thread Color (if known - or write "undecided" if you would like help deciding) *

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