

Glacial Hills Quilt Trail

Date _____

www.tonganoxiehistoricalsociety.org

Contact Information (for committee use only):

Contact Person(s) _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Mailing Address _____

City _____ State _____ Zip Code _____ County _____

Information to be Posted on the Glacial Hills Quilt Trail website:

Name of Quilt Block _____ Artist _____

Individual/Business with Quilt Block _____

Address of Quilt Block _____ County _____

Is the quilt block visible from the road? Yes No

E-mail photo of the Quilt Block installed to: TCHSTonganoxie@gmail.com

History – The following information is for promotional use of the Glacial Hills Quilt Trail and is not essential for listing on the trail. Provide answers to any of the questions that you are comfortable being published.

How long has the farm (or property) been in the current family?

When was the building built?

What was the building's original function?

What is the building used for now?

What material was used in the construction of the building?

Please share any interesting stories about the building, farm, area, or family?

In making this application, the undersigned agrees to accept the following conditions and requirements:
(Please initial each line below to indicate your agreement.)

I recognize that having a quilt block as part of the Glacial Hills Quilt Trail may increase traffic and/or visitors to its location. _____

The quilt block will remain on the building as least three (3) years and I will be responsible for any repairs or upkeep needed. _____

I understand that this quilt block will remain on the Glacial Hills Quilt Trail listing as long as it is maintained and in good repair as determined by the committee. _____

The quilt block is the property of the owner. The Glacial Hills Quilt Trail Committee will have promotional rights, i.e. postcards, photos, calendars to any quilt block on the Glacial Hills Quilt Trail. _____

I agree to indemnify and hold harmless the Tonganoxie Community Historical Society and the Glacial Hills Quilt Trail Committee, as well as their officers, committees, agents, employees, and volunteers for and against any and all claims, liabilities, losses, and causes of action related to the Glacial Hills Quilt Trail.

All blocks must be approved by the Glacial Hills Barn Quilt Committee. The Tonganoxie Community Historical Society may be taking a picture of your quilt block for the quilt trail.

Applicant's Signature _____

Applicant's Name (print) _____

Return completed application to:

Glacial Hills Quilt Trail
c/o Tonganoxie Community Historical Society
P.O. Box 785
Tonganoxie, KS 66086

(Application can also be emailed to TCHSTonganoxie@gmail.com along with photo of quilt block.)