



Barn Quilts of Central Minnesota Information Form and Application

To be included in the Barn Quilts of Central Minnesota Trail, please complete this form and return to the address below. (To be included in the trail you must reside in Todd, Morrison, Wadena or Cass counties.)

Individual/Business with Quilt Block _____
(This name will appear in any printed material and on the website)

Address of Quilt Block _____ County _____

GPS Coordinates Latitude _____ Longitude _____
(GPS Coordinates can be determined for you)

Name of Quilt Block _____

Circle size of Block: 2x 2, 4 x 4 or 8 x 8 (Only blocks 4 x 4 or larger will be approved for the trail)

Why was this pattern block and colors chosen?

Circle Building type: Barn School Business Machine Shed Other: _____

Type of Material on Building: (this is so we know how it is/will be fastened) _____

Please include any barnyard stories you have related to this property, family or quilt block.

Contact Information (For committee use only)

Contact Person _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Mailing Address _____

City _____ State MN Zip _____ County _____

935 7th ST. NE Staples MN 56479 218-894-2906 barnquiltscmn@gmail.com 5-18

In making this request to be included in the Barn Quilts of Central Minnesota (BQCMN), the undersigned agrees to accept the following conditions and requirements. Please check each line to indicate your agreement:

- _____ I own or have legal authority over the property listed above.
- _____ I understand that the BQCMN committee must approve the finished barn quilt in order for it to be included on the trail and in publicity materials.
- _____ The barn quilt must be visible from the road and/or be on a road that is frequently visited.
- _____ The quilt square must remain on the building for _____ years in order to be included on the trail and will be maintained by the owner. I will notify the BQCMN committee if the barn quilt becomes damaged due to natural events and needs to be removed from the trail.
- _____ If I rent, lease or sell, or otherwise convey my property, or if I remove the quilt square from the structure, I will notify the BQCMN committee so the quilt square can be removed from the publicity materials.
- _____ I will allow my barn quilt and building to be photographed by the public and photos be used by BQCMN committee in advertising the quilt trail. This includes websites, social media, traditional media, brochures, maps, etc.
- _____ I do not have to allow the public access to my property where the quilt square is located. I may post signs accordingly.
- _____ I acknowledge that it is my responsibility to seek any necessary zoning approval in the township or city where the barn quilt will be displayed.
- _____ I understand that the barn quilt belongs to me and that the BQCMN committee and partners can't be held liable for any damage due to the placement of the barn quilt on my property.
- _____ I agree to indemnify and hold harmless the BQCMN committee as well as its officers and partners (i.e. FFA, SMCF) for and against any and all claims, liabilities, losses and cause of action.
- _____ I live in one of the following counties: Todd, Wadena, Cass or Morrison.

Signature

Date

Signature

Date

For Committee Use Only:

Date Received: _____

Barn Quilt # _____

Notes: