

Heart to Heart Quilts Lanark County

request@hhqlc.ca

Request for a Quilt

Urgent (Y/N): _____

Quilt Request #: _____

Quilt # _____

Date Requested:		Date Delivered:	
RECIPIENT			
Name		M / F:	
Name of Parents (if recipient is a child)		Age: (if a child)	
Address			
City		Province:	Ont.
Postal Code			
Telephone		Reason for request:	
Cellular Telephone			
REQUESTOR			
Name			
Address			
City		Province	
Postal Code			
Telephone			
E-mail Address			
Alternate Delivery Information			
Name			
Address			
City		Province:	
Postal Code			
Telephone			

Message on Card:
Special Instructions/colours: