

50th Anniversary Fundraising Project Submission Form

First name:	Last name:		
Membership #:	Chapter (if applicable):		
Telephone:			
Design/pattern name:	Technique:		
Stitching level*: □ youth □	peginner □ intermediate □ advanced □ all		
Youth: 7 – 16 years of age			
Beginner: students need guidance in re-	ding stitch patterns or are new to the technique.		
Intermediate: students understand stitcl basic level; have a beginning understand	patterns but may need guidance; have taken this technique or a similar one at the beginner or ng of colour and design.		
Advanced: students read charts and stir understanding of colour and design that	h diagrams with ease, have a good understanding of the technique; have a good llows exploration and creativity.		
Background fabric:			
Threads used:			
Stitches used:			
	Finished project size (if applicable):		
	photograph or scan of the stitched design)		

Do you feel it should be a kit? ☐ Yes ☐ No	If yes ☐ Partia	al 🗆 Full	
List all kit items and their retail cost in the table below.			
Item	Item Retail Cost	Include in Partial or Full Kit?	
I declare that the project I have submitted and the instructions are my original works and that I have not infringed on any copyrights.			
Subject to acceptance by the Embroiderers' Associat Inc., I will allow exclusive sale of my design/pattern/k ending December 31, 2024. I retain the copyright of trights will return to me to use as I wish.	it on the EAC/ACB webs	ite, starting January 1, 2023 and	
Signature:	Date:		