## Request for Storybook Quilts

| Name:  |                 |
|--|-----------------|
| Home or Cell Phone Number  |                 |
| School Name  | Grade Level     |
| Address  |                 |
| School District  |                 |
| Phone Number   | -Mail           |
| Choose the collection you of Collection A - Preschool through  |                 |
| Collection B - 3 <sup>rd</sup> grade through   | n middle school |
| Collection C - a mixture of lev  | rels            |
| Collection D - Pioneer Storyboo<br>contains stories at the level<br>Wilder's Little House books                                    |                 |
| Each collection circulates for a period of 2 weeks to 4 weeks. Please specify when you would like the collection and the duration. |                 |

A confirmation letter will be mailed to you. If the time requested is not available, you will be contacted for alternate dates. Collections must be picked up and returned in person.

Mail this request to the Contact person for Story Book Quilts:

Quilt Guild of Metro Detroit

Pat Quenneville

40959 West Rosewood Drive

Clinton Township, MI 48038