



# CRAFTER OF THE YEAR OFFICIAL ENTRY FORM

## THE BASICS:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GENDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

## ABOUT YOUR CRAFTING:

How long have you been using Screen Sensation?  < 3 months  3-6 mo  6 mo – 1 yr  1-2 yrs

How often do you use Screen Sensation?  Daily  Weekly  Monthly  Quarterly  Annually

What mediums do you use Screen Sensation with?  Paper  Fabric  Housewares  Other

Please elaborate: \_\_\_\_\_

How would you describe your crafting style? (Traditional, modern, messy, etc.) \_\_\_\_\_

What initially drew you to Screen Sensation? \_\_\_\_\_

What has been your favourite project to screen print to date? \_\_\_\_\_

## CRAFTING LIVE:

Which Crafting Live would you like free tickets for? (Limit one)  Doncaster  Coventry  Peterborough  
 Sandown  Malvern  Belfast  Edinburgh  Bolton

## A BIT MORE INFORMATION:

Have you read and agree to the complete Terms and Conditions of this competition? (required)  Yes  No

Would you like to be contacted about joining the Screen Sensation Design Team?  Yes  No

*\*Please sign this form and submit along with your three completed projects.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date