PTA Reflections Student Submission Entry Form

This section to be completed by PTA	before distribution.			
LOCAL PTA	LOCAL PTA ID			
LOCAL PROGRAM CHAIR	EMAIL	РНС	PHONE	
COUNCIL PTA	_ DISTRICT PTA	REGION PTA	REGION PTA	
STATE PTA				
MEMBER DUES PAID DATE	INSURANCE PAID DATE	BYLAWS APPR	OVAL DATE	
STUDENT NAME		GRADE	AGE	
PARENT/GUARDIAN NAME	(S)			
EMAIL	PHONE			
MAILING ADDRESS				
CITY	STATE	ZIP		
Ownership in any submission sl constitutes entrant's irrevocable enhance, print, sublicense, pub responsible for lost or damaged constitutes acceptance of all rul PTA Reflections Official Rules.	e permission and consent lish, distribute and create l entries. Submission of er	that PTA may display, co derivative works for PTA htry into the PTA Reflection	py, reproduce, purposes. PTA is not ons program	
STUDENT SIGNATURE (Requ	uired.)			
PARENT/GUARDIAN SIGNA	TURE (Required.)			
GRADE DIVISION (Check Or PRIMARY (Pre-K-Grade 2) INTERMEDIATE (Grades (3- MIDDLE SCHOOL (Grades 0-1) HIGH SCHOOL (Grades 0-1) ACCESSIBLE ARTS (All Grades 0-1)	5) 5-8) 2) des)	ARTS CATEGORY (Check One) DANCE CHOREOGRAPHY FILM PRODUCTION LITERATURE MUSIC COMPOSITION PHOTOGRAPHY VISUAL ARTS		
TITLE OF ARTWORK (Requir	ed.)			
(/			



DETAILS If background music is used in dance/film, citation is required. Include word count for literature. List musician(s) or instrumentation for music. List dimensions for photography/ visual arts. Describe technology/platforms used in the creation process, including any generative elements.

ARTIST STATEMENT (Required). In 10 to 100 words, describe your work and how it relates to the theme.

