



Region # \_\_\_\_\_

Council \_\_\_\_\_

## ENTRY FORM

*This box is to be completed by PTA before distribution.*

PTA LEADER NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

PTA ID (8 digits) \_\_\_\_\_ PTA NAME \_\_\_\_\_

PTA Address \_\_\_\_\_ COUNCIL PTA \_\_\_\_\_ REGION PTA \_\_\_\_\_

MEMBER DUES PAID DATE \_\_\_\_\_ INSURANCE PAID DATE \_\_\_\_\_ BYLAWS APPROVAL DATE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ AGE \_\_\_\_\_ GENDER (optional) \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

*Ownership in any submission shall remain the property of the entrant, but entry into this program constitutes entrant's irrevocable permission and consent that PTA may display, copy, reproduce, enhance, print, sublicense, publish, distribute and create derivative works for PTA purposes. PTA is not responsible for lost or damaged entries. Submission of entry into the PTA Reflections program constitutes acceptance of all rules and conditions. I agree to the above statement and the National PTA Reflections Official Rules.*

STUDENT SIGNATURE: \_\_\_\_\_ PARENT/LEGAL GUARDIAN SIGNATURE: \_\_\_\_\_

**GRADE DIVISION (Check One)**

- PRIMARY-red (Preschool- Grade 2)
- INTERMEDIATE-yellow (Grades 3-5)
- MIDDLE SCHOOL-green (Grades 6-8)
- HIGH SCHOOL-blue (Grades 9-12)
- SPECIAL ARTIST-orange (All Grades)

**ARTS CATEGORY (Check One)**

- DANCE CHOREOGRAPHY
- FILM PRODUCTION
- LITERATURE
- MUSIC COMPOSITION
- PHOTOGRAPHY
- 2D VISUAL ARTS
- 3D VISUAL ARTS

TITLE OF ARTWORK \_\_\_\_\_

**ARTWORK DETAILS** (Dance/Film: cite background music; Music: musician(s)/instrumentation; Literature: word count; Photo/Visual Arts: materials & dimensions) \_\_\_\_\_

**ARTIST STATEMENT** (Must be 10 to 100 words describing your work and how it relates to the theme)

---



---



---



---



---