

To be completed by PTA before distribution.							
Local PTA		[	Local PTA I	D			
Local Program Chair		Email			Phone		
Council PTA	District PTA		Region PT	A	State PTA		
Member Dues Paid Date		Insurance Paid Da	ate		Bylaws Approval Date		
Student Name			_ Grade	Age	Classroom		
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/Guardian Signature		
Grade Division (Check One)	Arts Category (Check One)		
□ Primary (Pre-K-Grade 2)	Dance Choreography		
□ Intermediate (Grades (3-5)	□ Film Production		
□ Middle School (Grades 6-8)	□ Literature		
□ High School (Grades 9-12)	Music Composition		
□ Special Artist (All Grades)	Photography		
	□ Visual Arts		
Title of Work	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.

Artist Statement (In 10 to 100 words, describe your work and how it relates to the theme)