

## National PTA® Reflections Student Entry Form



	To be completed by PTA	before distribution	
JLL PTA NAME: COUNCIL	DISTRICT	REGION	STATE
ΓΑ/PTSA:	NATIONAL 8-DIGIT	ID #	STATE ID #
FLECTIONS CHAIR NAME: TA ADDRESS:		EMAIL:	
		FIIONL	
andards of Affiliation:  Membership dues paid date	□ Pudgot □ Pvl	ows approval data	□ Audit □ 000
Membership dues paid date	u budget u byt	aws approvat date	□ Audit □ 990
STUDENT NAME:			GRADE:
AGE: M/F:			
MAILINGADDRESS:			
CITY:			STATE:
ZIP:			
PARENT/GUARDIAN NAME(S):			
PARENT/GUARDIAN PHONE:			
E-MAIL:			
permission and consent that PTA may works for PTA purposes. PTA is not re constitutes acceptance of all rules and  Signature of student	sponsible for lost or damaged conditions.	entries. Submission of entr	ry into the PTA Reflections program ired if child is under 18 years)
JUDGING INFORMATION			
	JODGING INI C		
	HIGH SCHOOL (Grades 9-12) SPECIAL ARTIST (All Grades)	ARTS CATEGORY (Check C □ DANCE CHOREOGRAPH' □ FILM PRODUCTION □ LITERATURE	Y □ MUSIC COMPOSITION
TITLE OF ARTWORK:			
ARTWORK DETAILS: (Dance/Film:	cite background music: Musi	c: musician(s)/instrumen	tation: Literature: word count:
Photo/Visual Arts: materials & dime		( )	,
ARTIST STATEMENT: (At least 10 w	vords, 100 words max descri	bing how your work relat	es to the theme)