



National PTA® Reflections

Student Entry Form



To be completed by PTA before distribution:

PTA LEADER NAME _____

EMAIL _____ PHONE _____

LOCAL PTA NAME _____

NATIONAL 8-DIGIT ID # _____ STATE _____

REGION _____

MEMBER DUES PAID DATE _____ INSURANCE PAID DATE _____ BYLAWS APPROVAL DATE _____

Register at PTA.org/Reflections

DEADLINE FOR ENTRY: _____

TEACHER/ROOM #: _____

STUDENT NAME _____ **GRADE** _____ **AGE** _____ **M/F** _____

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 (Preschool- Grade 2) ☐ HIGH SCHOOL (Grades 9-12)
☐ INTERMEDIATE (Grades 3-5) ☐ SPECIAL ARTIST (All Grades)
☐ MIDDLE SCHOOL (Grades 6-8)

ARTS CATEGORY (Check One)

- ☐ DANCE CHOREOGRAPHY ☐ MUSIC COMPOSITION
☐ FILM PRODUCTION ☐ PHOTOGRAPHY
☐ LITERATURE ☐ 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)
