WSPTA only- Reflections Student Submission Entry Form

This section to be completed by	y PTA before distribu	ition.			
LOCAL PTA		LOCAL PTA Number			
LOCAL PROGRAM CHAIR		EMAIL		PHONE	-
COUNCIL PTA					
WSPTA DUES PAID DATE	INSUR,	INSURANCE PAID DATE		NG RULES APPROVAL DATE	
STUDENT NAME		GRADE	AGE	SCHOOL	
PARENT/GUARDIAN NAM	1E(S)				
EMAIL					
PHONE					
MAILING ADDRESS				-	
	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 □ *ACCESSIBLE ARTS (PK-5th Grades) □ PHOTOGRAPHY □ *ACCESSIBLE ARTS (6th-12th Grades) UVISUAL ARTS *if your child has 504/IEP or ADA accommodations, they can choose to enter in the accessible arts division

TITLE OF ARTWORK

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)



