2015–2016 PTA Reflections Program | STUDENT ENTRY FORM

Let Your Imagination Fly

For Local PTA Use Only

Local PTA Contact Name: Eric Dacon Phone Number: 469-571-4301 Email: ericdacon@yahoo.com

Membership Verified by: _____ Date: _____

For Council PTA/Region Use Only

Local PTA must attain Active Status with Texas PTA by October 31st ☐Dues Received ☐Board Member Information on File

Please type or print clearly in black or blue ink (do not use pencil). This form must be completed in its entirety. If additional space is needed, please continue onto the back or a separate sheet of paper and clearly mark with your full name.

Please submit your entry and this form to your PTA by: November 6, 2015

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

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PARENT/GUARDIAN NAME(S): _____

PARENT/GUARDIAN PHONE: _____ **E-MAIL:** _____

SCHOOL NAME: _____ **SCHOOL DISTRICT:** _____

TEACHER NAME: _____ **TEACHER EMAIL:** _____

The student <u>or</u> at least one person from their primary household must be a current member of the Local PTA/PTSA where the student is participating. Each Local PTA/PTSA may determine a date by which the member must join.

REQUIRED PTA MEMBER NAME(S): _____ **CHOOSE ONE:** ☐ Current Member. Date Joined: _____

☐ I/We need to join our Local PTA

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.

_____ _____

Signature of student **Signature of parent/legal guardian *(required if child is under 18 years)***

JUDGING INFORMATION

GRADE DIVISION *(Check One)*

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

*Please refer to the Special Artist Guidelines if you believe your entry qualifies for this division.
Special Artist entrants should select both their grade division and the Special Artist box.

ARTS CATEGORY *(Check One)*

☐ DANCE CHOREOGRAPHY
☐ FILM PRODUCTION
☐ LITERATURE
☐ MUSIC COMPOSITION
☐ PHOTOGRAPHY
☐ VISUAL ARTS

TITLE OF ARTWORK (REQUIRED): _____

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

ARTIST STATEMENT (REQUIRED): Statement must be 10- 100 words describing how your work relates to the theme.

_____

_____

_____