



# National PTA® Reflections

## Student Entry Form

2015-16 Let Your Imagination Fly!



STUDENT NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ M/F: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN NAME(S): \_\_\_\_\_

PARENT/GUARDIAN PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

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\_\_\_\_\_  
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) ☐ 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: (At least 10 words, 100 words max describing how your work relates to the theme)

#### PTA/PTSA INFORMATION - To be completed by PTA before distribution

SOUTH CAROLINA PTA DISTRICT \_\_\_\_\_

PTA/PTSA SCHOOL NAME: \_\_\_\_\_ NATIONAL 8-DIGIT ID # \_\_\_\_\_

REFLECTIONS CHAIR NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CHAIR PHONE: (MOBILE) \_\_\_\_\_ (HOME) \_\_\_\_\_

PTA ADDRESS: \_\_\_\_\_

*Chairs – Verify unit's good standing with your District President or the SCPTA office before advancing entries.*