



WSPTA only- Reflections Student Submission Entry Form

This section to be completed by PTA before distribution.

LOCAL PTA International Community School PTSA LOCAL PTA Number 00189374
LOCAL PROGRAM CHAIR Rukmini Raman EMAIL rraman@icsptsa.org PHONE (425) 635 8723
COUNCIL PTA Lake Washington PTSA COUNCIL CHAIR EMAIL reflections@lwptsa.net WSPTA
-----Local PTA leader to fill in:-----
MEMBER DUES PAID DATE 09/20/2023 INSURANCE PAID DATE 11/28/2022 BYLAWS APPROVAL DATE 09/13/2023

STUDENT NAME _____ GRADE _____ AGE _____ SCHOOL _____

PARENT/GUARDIAN NAME(S) _____

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/GUARDIAN SIGNATURE _____

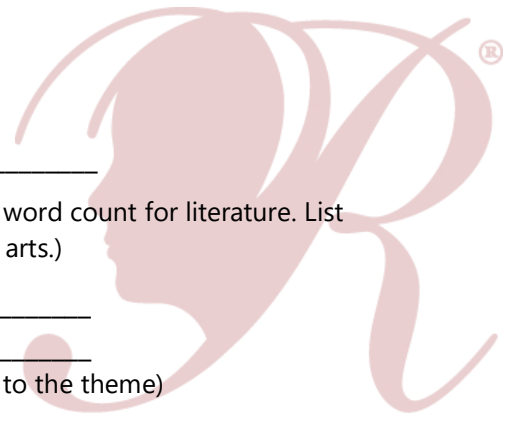
GRADE DIVISION (Check One)

- ☐ PRIMARY (Pre-K-Grade 2)
- ☐ INTERMEDIATE (Grades 3-5)
- ☐ MIDDLE SCHOOL (Grades 6-8)
- ☐ HIGH SCHOOL (Grades 9-12)
- ☐ *SPECIAL ARTIST (PK-5th Grades)
- ☐ *SPECIAL ARTIST (6th-12th Grades)

ARTS CATEGORY (Check One)

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

*if your child has 504/IEP or ADA accommodations, they can choose to enter in the special artist 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)

