

National PTA® Reflections Student Entry Form



To be completed by PTA before distribution:			DEADLINE FOR ENTRY: November 4 TEACHER/ROOM #:	
PTA LEADER NAME Krista Threefoot			TEACHER/F	:OOM #:
EMAIL two3foots@yahoo.com PHONE 301-351-8912			Parents:	
LOCAL PTA NAME Stevens Forest E	Elementary		This fam. MI	TOT be submitted
NATIONAL 8-DIGIT ID # STATE ID #			This form MUST be submitted with your child's entry.	
COUNCIL PTA	DISTRICT PTA			
REGION PTA PTACHC	STATE PTA Maryland PT	<u>A</u>		
MEMBER DUES PAID DATE INSURA	ANCE PAID DATE BYLAWS APPRO	VAL DATE		
Register	at PTA.org/Reflections			
STUDENT NAME		GRADE	AGE	M/F
PARENT/GUARDIAN NAME	E	MAIL	PHON	E
MAILING ADDRESS	C	ITY	STATE	ZIP
works for PTA purposes. PTA is not constitutes acceptance of all rules and STUDENT SIGNATURE:	nd conditions. I agree to the abov	e statement and the N	lational PTA Refle	ections Official Rules.
GRADE DIVISION (Check One)		ARTS CATEGORY (CI		_
☐ PRIMARY (Preschool- Grade 2) ☐ INTERMEDIATE (Grades 3-5) ☐	☐ HIGH SCHOOL (Grades 9-12)☐ SPECIAL ARTIST (All Grades)	☐ DANCE CHOREO ☐ FILM PRODUCTION		MUSIC COMPOSITION PHOTOGRAPHY
☐ MIDDLE SCHOOL (Grades 6-8)	J SPECIAL AINTIST (All Grades)	☐ LITERATURE		VISUAL ARTS
TITLE OF ARTWORK				
ARTWORK DETAILS (Dance/Film: cite				rd count; Photo/Visual
Arts: materials & dimensions)				
ARTIST STATEMENT (Must be 10 to 2	100 words describing your work	and how it relates to t	he theme)	