WSPTA only- Reflections Student Submission Entry Form

This section to be complete	d by PTA before distril	bution.			
LOCAL PTALOCAL PTA Number					
LOCAL PROGRAM CHAIR		EMAIL		PHONE	
COUNCIL PTA	COUNCIL	CHAIR EMAIL			
Local PTA leader to fil	l in:				
WSPTA DUES PAID DATE	INSU	RANCE PAID DATE	STANDI	ING RULES APPROVAL DATE	
STUDENT NAME		GRADE	AGE	SCHOOL	_
PARENT/GUARDIAN NA					
EMAIL					
PHONE		<u> </u>			
MAILING ADDRESS				<u>-</u>	
CITY	STATE	ZIP			
STUDENT SIGNATU PARENT/GUARDIAI					
GRADE DIVISION (Chec		ARTS CATEGO			
☐ PRIMARY (Pre-K-Grade	-	☐ DANCE CHOREOGRAPHY			
☐ INTERMEDIATE (Grade		☐ FILM PRODUCTION			
☐ MIDDLE SCHOOL (Gra	,				
·	HIGH SCHOOL (Grades 9-12) ☐ MUSIC C				
□ *ACCESSIBLE ARTS (PK □ *ACCESSIBLE ARTS (6th	•				
,	,			nter in the accessible arts divi	ision
TITLE OF ARTWORK _					
DETAILS (If background or instrumentation for m				lude word count for literature.	List musician(s)
ARTIST STATEMENT (In	10 to 100 words	doccribo vour work a	and how it role	atas to the theme)	
ANTIST STATEMENT (III)	TO TO TOO WOTUS, (uescribe your work a	mu now it reli	ates to the theme)	



