



2011-2012 PTA Reflections Program | STUDENT ENTRY FORM THE: "Diversity Means..."

Directions: Please type or print clearly in black or blue ink (do not use pencil). Completely fill out the form down to and including the required signatures. Leave the boxed area for local PTA information blank. If you need more space, use the back of this form or an extra sheet of paper. Be sure to write your full name on any additional pages.

Grade Division (check one)

Grade _____ (Red) Primary: preschool–Grade 2

Age _____ (Yellow) Intermediate: Grades 3-5

GENDER: (Green) Middle/Junior: Grades 6-8

Male (Blue) Senior: Grades 9-12

Female

Teacher _____ Track: _____

Arts Area (check one)

Dance Choreography ***UTAH PTA ONLY:**

Film Production THEATRE

Music Composition 3D ART

Literature

Visual Arts

Photography Signed Utah Media Release Inc.: _____

Title of Artwork:
(Required)

REQUIRED INFORMATION

Required Artist Statement:
Explain how your work relates to the theme (Maximum 250 Words) _____

*Must also use the Attached Utah Artist Statement Form (Print your contact information clearly)

Photography, Visual Arts, & 3D: Give the dimensions of the work in inches, including mats. L _____ W _____ (3D) H _____

Photography: Location/date of shot: _____

Describe the type of camera and process used in preparing the piece. _____

Visual Arts & 3D: Describe the medium (crayons, oil on canvas, etc.). _____

Dance & Theatre: Name(s) of performer(s): _____

Film: Name(s) of person(s) appearing in your FILM: _____

Did you use film-editing software? If so, which software? _____

Dance, Theatre, and Film Production: Credit the background music below (title, composer, and performer). _____

Musical Composition: Name(s) of person(s) who performed your composition: Traditional Instrumentation Midi Instrumentation

Did you use music composition software? If so, which software? _____

Are lyrics included? If so, how do your lyrics complement your composition? _____

All other Categories using a computer-name the software and file format: _____

Fold Here

Student's First name _____ **Middle Int.** _____ **Last Name:** _____

Address 1 _____ Address 2 _____

City _____ State: _____ ZIP: _____

Phone ☎ _____ Email ✉ _____

I grant to National PTA an irrevocable, unlimited license to display, copy, sell, sublicense, publish, and create and sell derivative works from, my work submitted for the Reflections Program. National PTA is not responsible for lost or damaged works. Entries may not be returned. I understand that I must participate in the Reflections Program through a PTA/PTSA in good standing. I affirm that this is my own original work. I understand that the submission of my entry into the Reflections Program constitutes acceptance of the above conditions.

→ _____ → _____

Signature of Student Signature of Parent/Legal guardian (Required for students under 18)

TO BE COMPLETED BY LOCAL PTA **Check one:** PTA PTSA **Local eight-digit PTA ID:** _____

Local chair name _____ Official PTA/PTSA name _____

PTA address _____ City _____ State _____ ZIP _____

E-mail _____ Phone (____) _____

Local PTA good standing status: Membership Dues Paid Date ____/____/____ Bylaws Approval Date ____/____/____

Council Name _____ ***Complete Local Box before Copying**