



2010–2011 PTA Reflections Program | STUDENT ENTRY FORM Theme: "Together We Can"

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 _____
Age _____

Gender M F

Grade Division (check one)

- Primary: preschool–grade 2
- Intermediate: grades 3–5
- Middle/Junior: grades 6–8
- Senior: grades 9–12

Arts Area (check one)

- Dance Choreography
- Film Production
- Literature
- Musical Composition
- Photography
- Visual Arts

Title of Work:**Required Artist Statement:**

Explain how your work relates to the theme. _____
(Maximum 250 words)

See attached (Please print your name on any attached sheets.)

REQUIRED INFORMATION

Photography and Visual Arts: Give the dimensions of the work in inches, including mat. L _____ W _____

Photography: Location/date of shot: _____

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

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

Dance Choreography: Name(s) of performer(s): _____

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

Was a computer used? If so, name the software and hardware. _____

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

Musical Composition:

Check one: Traditional Instrumentation Synthesizer

Name(s) of person(s) who performed your composition: _____

Was a computer used? If so, name the software and hardware. _____

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

F o l d h e r e

Student's

first name _____ Middle intl. _____ Last name _____

Address 1 _____

Address 2 _____

City _____

State _____

ZIP _____

Phone (_____)

E-mail _____

I assign to National PTA copyright in my works 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 (necessary if child is under 18 years)

TO BE COMPLETED BY LOCAL PTA

Check one: PTA PTSA

Local eight-digit PTA ID: 00561749

Local chair name Jennifer Kateli Official PTA/PTSA name Saegert Elementary PTA

PTA address 5600 Schorn Drive City Killeen State TX ZIP 76542

E-mail saegertreflections@yahoo.com Phone (254) 336-6660

Local PTA good standing status: Membership dues paid date 8/31/10 Insurance paid date 11/11/09 Bylaws approval date 11/8/06