

National PTA Reflections® Program Student Entry Form 2022-2023 "Show Your Voice"



	To be completed by Local PTA	before distribution to students	
FULL LOCAL PTA/PTSA NAME:			
LOCAL PTA/PTSA ADDRESS:			
LOCAL REFLECTIONS CHAIR NAME:			
LOCAL CHAIR EMAIL:	LOCAL CHAIR PHONE:		
NATIONAL 8-DIGIT PTA ID #	COUNCIL	STATE Maryland	☐ PTA in good standing
STUDENT NAME:		GRADE: AGE:	_ CLASSROOM:
PARENT/GUARDIAN NAME(S):			
PARENT/GUARDIAN PHONE	PARENT/GUA	RDIAN EMAIL	
MAILING ADDRESS:			
CITY:		STATE:	ZIP:
Reflections program constitutes acc Reflections Official Rules. Signature of student	· 	. I agree to the above statement	
Fold Here			 Fold Here
CDADE DIVISION (Change Out)	JUDGING INFOR	_	
GRADE DIVISION (Choose One) PRIMARY (Preschool- Grade 2)	HIGH SCHOOL (Grades 9-12)	ARTS CATEGORY (Choose One) DANCE CHOREOGRAPHY	MUSIC COMPOSITION
INTERMEDIATE (Grades 3-5)	SPECIAL ARTIST (All Grades)	FILM PRODUCTION	PHOTOGRAPHY
MIDDLE SCHOOL (Grades 6-8)		LITERATURE	VISUAL ARTS
TITLE OF ARTWORK: (Avoid using th	e theme as the title)		
ARTWORK DETAILS: (Dance/Film: cit Arts: materials/equipment & dimens		ian(s)/instrumentation; Literatur	e: word count; Photo/Visual
ARTIST STATEMENT: (Must be 10 to	o 100 words describing your wor	k and how it relates to the them	ne)