



National PTA® Reflections

Student Entry Form



To be completed by PTA before distribution

PTA/PTSA: Dover Middle School NATIONAL 8-DIGIT ID # 00206176
 REFLECTIONS CHAIR NAME: Stefanie Jolicœur EMAIL: tsjolicœur@comcast.net
 PTA ADDRESS: 16 Daley Dr Dover NH PHONE: _____
 Local PTA good standing status:
 Membership dues paid date _____ Insurance paid date _____ Bylaws approval date _____

STUDENT NAME _____ GRADE: _____ AGE: _____ GENDER OPTIONAL _____
 MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 PARENT/GUARDIAN NAME(S): _____
 PARENT/GUARDIAN PHONE: _____ E-MAIL: _____

Ownership in any submission shall remain the property of the entrant, but entry into this program constitutes entrant's irrevocable permission and consent that PTA may display, copy, reproduce, enhance, print, sublicense, publish, distribute and create derivative works for PTA purposes. PTA is not responsible for lost or damaged entries. Submission of entry into the PTA Reflections program constitutes acceptance of all rules and conditions. *I agree to the above statement and the National PTA Reflections Official Rules.*

Signature of student

Signature of parent/legal guardian (required if child is under 18 years)

JUDGING INFORMATION

GRADE DIVISION (Check One)

- PRIMARY (Preschool- Grade 2) HIGH SCHOOL (Grades 9-12)
 INTERMEDIATE (Grades 3-5) SPECIAL ARTIST (All Grades)
 MIDDLE SCHOOL (Grades 6-8)

ARTS CATEGORY (Check One)

- DANCE CHOREOGRAPHY MUSIC COMPOSITION
 FILM PRODUCTION PHOTOGRAPHY
 LITERATURE VISUAL ARTS

TITLE OF ARTWORK: _____

ARTWORK DETAILS REQUIRED: (Dance/Film: cite background music; Music: musician(s)/instrumentation; Literature: word count; Photo/Visual Arts: materials used & dimensions, Photo/Film: name persons appearing)

ARTIST STATEMENT: (Must be 10 to 100 words describing how your work relates to the theme). Attachments accepted.

