



# Entry Form

*To be completed by PTA before distribution.*

LOCAL PTA Garden City LOCAL PTA ID 00017111  
LOCAL PROGRAM CHAIR Juliet Acquavito / Becky Ludica EMAIL reflections@gardencitypta.org PHONE 516-395-8785 / 917-517-2564  
COUNCIL PTA N/A DISTRICT PTA Garden City PTA REGION PTA Nassau Region STATE PTA New York  
MEMBER DUES PAID DATE June 2020 INSURANCE PAID DATE May 28, 2020 BYLAWS APPROVAL DATE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ AGE \_\_\_\_\_ CLASSROOM \_\_\_\_\_  
PARENT/GUARDIAN NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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.

STUDENT SIGNATURE \_\_\_\_\_ PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

**GRADE DIVISION (Check One)**

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

**ARTS CATEGORY (Check One)**

- DANCE CHOREOGRAPHY
- FILM PRODUCTION
- LITERATURE
- MUSIC COMPOSITION
- PHOTOGRAPHY
- VISUAL ARTS

TITLE OF WORK \_\_\_\_\_ DETAILS \_\_\_\_\_

If background music is used in **dance/film**, citation is required. Include word count for **literature**. List musician(s) or instrumentation for **music**. List dimensions for **photography/visual arts**.

**ARTIST STATEMENT** (In 10 to 100 words, describe your work and how it relates to the theme)

---



---



---



---



---