

Place color code dot here (DO NOT use colored paper)

Write Region Number here

# National PTA 2008–2009 Reflections Program Official Entry Form

**Directions:** Except for the two boxes at the end, students must fill out the entire form. For more writing space, use the back of this form or an extra sheet of paper.

Theme:  
"wow..."

Grade _____	Grade Division (check one)	Arts Area (check one)	Utah PTA Only
Age _____	___ Primary: Preschool–Grade 2	___ Literature	___ Three Dimensional Art
Track _____	___ Intermediate: Grades 3–5	___ Photography	___ Theater
Teacher _____	___ Middle/ Junior: Grades 6–8	___ Visual Arts	
	___ Senior: Grades 9–12	___ Musical Composition	
		___ Film/Video	
		___ Dance	

Title of work (if any) \_\_\_\_\_

Optional artist statement \_\_\_\_\_

**Visual Arts and Photography:** give dimensions of work in inches, including mat \_\_\_\_\_

**Photography:** describe the process in preparing the piece \_\_\_\_\_

**Visual Arts:** media (crayons, oil on canvas, etc.) \_\_\_\_\_

**Musical Composition:** must respond to the following:

Circle one: Traditional instrumentation or synthesizer

Who performed your composition for your recording? \_\_\_\_\_

Was a computer used? If so, name the software and hardware \_\_\_\_\_

Are lyrics included? If so, how do your lyrics work with your composition? \_\_\_\_\_

Fold here

Student's first name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail address \_\_\_\_\_

National PTA includes the state, district, council, or local PTA/PTSA organization or unit. I grant National PTA permission to use my works for commercial or noncommercial use, including but not limited public presentation of the work and reproduction of the work in print, electronic, and multimedia formats to promote the Reflections Program. National PTA may continue to use my work as long as it has access to a copy or to a slide. 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 the above conditions.**

Signature of student \_\_\_\_\_

Signature of parent/legal guardian (necessary if child is under 18 years) \_\_\_\_\_

**To be completed by local PTA**

Circle one: PTA PTSA

Local chair \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ PTA/PTSA name \_\_\_\_\_

PTA address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Local Eight Digit National PTA ID 00 \_\_\_\_\_ Council \_\_\_\_\_

**State PTA information:**

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2008-2009 UTAH PTA REFLECTIONS  
**MEDIA RELEASE FORM**

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Region \_\_\_\_\_

Category \_\_\_\_\_

Parents/Guardians:

The undersigned parent/guardian of \_\_\_\_\_ hereby gives permission to the Utah PTA to publish photographs of said child or child's art on the Utah PTA Web site or in any of its publications. **I understand that the said child's name will appear with the picture, grade and name of the school.** I do further release and discharge the Utah PTA and its officers, employees, agents, and volunteers from and against any and all damages, complaints, costs, and fees arising from said use of such photograph(s). I agree to refrain from instituting, pressing, or in any way aiding any claim, demand, action or cause of action for damages, costs, compensation, or fees against the same in connection with such use.

Please take the time to review the Media Release Form below and select an appropriate option. Agreeing to the Media Release Form does not in any way imply that the photographs of your child of their artwork will be published; it simply indicates that the Utah PTA has permission in the event they are needed.

MEDIA RELEASE FORM

- The Utah PTA has permission to publish photographs of my child or my child's artwork, their name, grade, and name of the school on the Utah PTA website or in any of their publications.
  
- I do not want photographs of my child or my child's artwork to be published by the Utah PTA.

By signing below, I verify that I understand the above release and that I have indicated my preference.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child's Name (Please print)

***Each entry must have this form signed by the guardian of the child.***