



“Beauty is . . .”
 2009–2010 PTA Reflections Program
 LOCAL PTA PARTICIPATION FORM

The following information is required from all local PTAs participating in the Reflections Program. Please complete this form and forward it with your Reflections Program entries to the next level of judging. This form documents the number of entries submitted to the Reflections Program at the local PTA level.
Please provide all of the information requested.

This form is to be completed by the local PTA representative. (Please use black ink only)

Local PTA Information

PTA/PTSA name _____

PTA/PTSA address _____

City _____ State _____ ZIP _____

PTA/PTSA president’s name _____

Reflections Program chair’s name _____

Reflections Program chair’s address _____

City _____ State _____ ZIP _____

Phone () E-mail _____

School name _____

School address _____

City _____ State _____ ZIP _____

Total number of students enrolled in the school _____

Total number of students participating in the Reflections Program _____

	Total entries received	Total entries Forwarded (20%)
Dance choreography		
Film production		
Literature		
Musical composition		
Photography		
Visual arts		
Total number of entries		

Please send this completed form with your entries to the next level of judging.

****Council and Area PTAs, please forward all local forms accompanied by your participation form to the State Level with your advancing artwork.**