

	Littly form			
To be completed by PTA before di	stribution.			
LOCAL PTA Birch Lane	PTA Local PT	AID 10-12	8	
Local Program Chair Diane	SFOGIIA Email DIA Yak trict PTA Massapequa Region	nestualia	① Phone(<i>\(\begin{align*} \)</i>	645-7626
Council PTA Massapequa Dist	trict PTA Massapequa Region	PTA NASSAI	State PTA	NY
Member Dues Paid Date 9 20	123 Insurance Paid Date 1	12023 By	laws Approval Date	10/14/22
Student Name	Grade	Age	Classroom	
Parent/Guardian Name		Email	Phone	
Mailing Address		City	State	Zip
permission and consent that PTA ma works for PTA purposes. PTA is not re	emain the property of the entrant, but only display, copy, reproduce, enhance, property of the entrant, but or damaged entries. If a conditions, I agree to the above states and conditions.	rint, sublicense, publ Submission of entry	ish, distribute and cre into the PTA Reflectio	eate derivative ons program
Student Signature	Parent/Guardian Signature			
Grade Division (Check One)	Arts Category (Check One)			
☐ Primary (Pre-K-Grade 2)	☐ Dance Choreography			
☐ Intermediate (Grades (3-5)	☐ Film Production			
☐ Middle School (Grades 6-8)	☐ Literature			
☐ High School (Grades 9-12)	☐ Music Composition			
☐ Special Artist (All Grades)	☐ Photography			
	☐ Visual Arts			
Title of Work	Det	ails		
	e/film, citation is required. Include wor			strumentation 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)