

ENTRY FORM

Home Room Teacher _____
Classroom _____

To be completed by PTA before distribution.

Student Entry Deadline: Mon. 10/22/18

LOCAL PTA Mt. Vernon Community School PTS LOCAL PTA ID 00014285
 LOCAL PROGRAM CHAIR Clese Erikson EMAIL mvc reflections@gmail.com PHONE 202-577-8801
 COUNCIL PTA Alexandria City DISTRICT PTA Northern Virginia REGION PTA na STATE PTA VA
 MEMBER DUES PAID DATE 6/5/18 INSURANCE PAID DATE 8/17/18 BYLAWS APPROVAL DATE 5/16/17

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

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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)
