



“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.

**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
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.**