



## ENTRY FORM

**This box is to be completed by PTA before distribution.**

PTA LEADER NAME Jamisen Sivak EMAIL jamisen@winterjewel.com PHONE 248-219-0228

PTA ID 00030224 PTA NAME Sashabaw Middle PTA STATE MI

COUNCIL PTA Clarkston PTA Council DISTRICT PTA Clarkston Comm. Schools REGION PTA D

MEMBER DUES PAID DATE 7/2017 INSURANCE PAID DATE 1/2017 BYLAWS APPROVAL DATE 9/2016

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ AGE \_\_\_\_\_ GENDER (optional) \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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STUDENT SIGNATURE: \_\_\_\_\_ PARENT/LEGAL GUARDIAN SIGNATURE: \_\_\_\_\_

**GRADE DIVISION** (Check One)

- ☐ PRIMARY (Preschool- Grade 2) ☐ HIGH SCHOOL (Grades 9-12)  
☐ INTERMEDIATE (Grades 3-5) ☐ SPECIAL ARTIST (All Grades)  
☐ MIDDLE SCHOOL (Grades 6-8)

**ARTS CATEGORY** (Check One)

- ☐ DANCE CHOREOGRAPHY ☐ MUSIC COMPOSITION  
☐ FILM PRODUCTION ☐ PHOTOGRAPHY  
☐ LITERATURE ☐ VISUAL ARTS

TITLE OF ARTWORK \_\_\_\_\_

**ARTWORK DETAILS** (Dance/Film: cite background music; Music: musician(s)/instrumentation; Literature: word count; Photo/Visual Arts: materials & dimensions) \_\_\_\_\_

**ARTIST STATEMENT** (Must be 10 to 100 words describing your work and how it relates to the theme)

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