

**REFLECTIONS FILM/VIDEO PRODUCTION/STUDENT ENTRY FORM (B) 2009-2010**

Name of PTA/PTSA School \_\_\_\_\_

Address/City/Zip of School \_\_\_\_\_

Name of Contact Person \_\_\_\_\_

Phone Number of Contact Person (day) \_\_\_\_\_ (evening) \_\_\_\_\_

PTA Council Affiliation \_\_\_\_\_

**FILM/VIDEO PRODUCTION - Names of Film/Video entrants advancing to State Level**

**Primary - 2**

1. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

2. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

**Grades 3 - 5**

1. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

2. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

**Grades 6 - 8**

1. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

2. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

**Grades 9 - 12**

1. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

2. \_\_\_\_\_  
Name Address/City/Zip Phone  
Grade Division Title of Work \_\_\_\_\_

Ship this form along with entries to:

**Elleen Laughlin  
153 S. 10<sup>th</sup> Ave.  
Beech Grove, IN 46107-1944**