Registration Period:
12/1/25 - 3/31/26

Complete this registration form including your parent's signature and submit to **lwoodson@edgewaterhealth.org.**

MBK LAKE COUNTY, IN MSK LAKE COUNTY, IN

Get Unplugged!

Take an intentional break from digital devices to reduce stress and anxiety, improve sleep and focus, and foster real-world connections.

ART COMPETITION

REGISTRATION & PARENT AUTHORIZATION FORM

Student Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name of High School: _____

High School Grade Level: _____

Parent Name Printed: _____

Parent's Signature: _____

Parent's signature permits Edgewater Health to use the student's name, photo, and artwork or photo of artwork in event promotions, including social media, print, online, radio, and public displays. Edgewater Health will retain artwork for a period of up to 12 months to effectively promote education in mental health and wellness. All participating students, parents, and teachers will be recognized at a scheduled event, where the artwork will be returned at that time.

Parent Phone Number: _____ Parent Email: _____

Student artist's statement / reflection on the theme ***Get Unplugged!*** in 300 - 500 words (typewritten preferred and submitted to lwoodson@edgewaterhealth.org by the deadline):

_____

_____

_____

_____

_____

_____

edgewater health