## THE ALASKA CLUB

## WELLNESS PARTNERSHIP - LEVEL 2

The Alaska Club agrees to assist LINKS Resource	e Center (organization name), by providing the following
some or all the cost ofEmployees /sl .	( <i>employees, team members, etc.</i> ). Should you choose to cover membership, The Alaska Club membership can have a significant
impact on their energy, health, and their focus. LINKS	Resource Center will notify The Alaska Club if anyone
· · · · · · · · · · · · · · · · · · ·	will notify The Alaska Club if anyone and shall be responsible for the dues subsidy of terminated all
COMMINION COMMINION	I IIUN N MODOIIMAA / Amaama
Employees (s) membership(s) at the	amount of \$6/.00 per individual Membership /
per family membership.	per individual Membership /
This wellness partnership may be cancelled with a 30-day no	tice after a year from the effective date of: $\frac{02/15/34}{34}$
Benefits to	Employees:
* \$0 Enrollment	[ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [
<ul> <li>1st &amp; Half of Second Month of Me</li> <li>4 Months of Membership Plus for</li> </ul>	mbership Dues Free Free
Organization Name: LINKS Resource Center	Address: 777 N Crusey St, Ste. A101, Wasilla, AK 99654
Contact Name: Aaron Wright	Phone Number: 9073733632
<sub>mall:</sub> aaron@linksprc.org	Billing Contact (if applicable): Aaron Wright
hone Number: 9073733632 Email: aaron@l	linksprc.org
rganization Signature: <u>Aaron Wright</u>	Date: 02/15/24
rinted Name: Aaron Wright	Title: Executive Director
AC Representative Signature: 226.	Date: 02/15/24
e Alaska Club Wellness Partnership Representative: Terry	/ Nelsen Title: LMC Wasilla
one Number: 9078647132 Email: tnelsen@t	healaskaclub.com
mment:	Jau
30 Fitness Consultation covered by employee. 38 Annual Fee covered by employer.  Aaron Wright 2/22/2024	5 ° 0 2 2 2 1111