

Wellness Partnership

The Alaska Club agrees to assist _ by providing the following wellness) NVEIL 1963(II) 4 (Organization In package to their (E	UEVE (IPINENT 1-1- ame) EMPLOYEES : mployees, teansmembers, etc.)	C Start Date: 5-12-14 Renewal Date: 5-11-17
	Wellness	Calendar	
☐ Onsite	☐ Open	House	☐ Fitness Party
1st Qtr		1st Qtr	1st Qt
2nd Qtr	40.00	2nd Qtr	2nd Q
3rd Qtr		3rd Qtr	3rd Qt
4th Qtr		4th Qtr	4th Qt
☐ Fitness Challenge	☐ Fitnes	s Seminar	☐ Wellness Fair
1st Qtr		1st Qtr	Date
2nd Qtr		2nd Qtr	Date
3rd Qtr		3rd Qtr	Date
4th Qtr		4th Qtr	Date
The Alaska Club agrees	to offer the following		to each of each wellness activity.
Benefits to Employees: \$0 Enrollment and First Month FREE Dues			
2 months Membership Plus		agrape to promo	te events in the following manner:
\$20-\$30 Fitness Consult Fee Required upon Enrollment		·	nization website, intranet or newsletter
12-Month Agreement Required Available during events, onsites or open h		☐ Posters to annour	



THE ALASKA CLUB Corporate Agreement

Subsidizing or partially subsidizing the cost of a The Alaska Club membership	is completely optional. Should you
choose to, covering some or all of the cost of your <u>Cupley ce:</u> 's The Alas	ka Club membership can have a
significant impact on their energy, health and their focus. Organizations that so	ubsidize their employee memberships
agree to give The Alaska Club Member Accounting (337-9550 ext. 1124) sixty-day	y prior notice to discontinuing the subsidy
of membership dues for its cmployees in general.	
will notify The Alaska Club if anyone for whom it	pays a subsidy is no longer
employed there and shall be responsible for the dues subsidy of terminated	prior to this
notification. All are individually responsible for cancelling the	ir membership commitment.
subsidizes/reimburses their employee	s membership(s) at the amount of
per individual membership.	
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Organization Name: <u>Dwell Design & Developme</u>	ent LLO
Address: <u>PO Box 72307</u>	
Contact Name: Brady or Andrea Pile	
Phone Number: <u>(907) 452-8233</u> Fax Number:	Email: <u>houseop//e @</u>
Billing Contact (if applicable): Brady Pile	gmðil com
Phone Number: <u>(907) 4.50-9.586</u> Fax Number:	Email: <u>brady, pile @</u>
	gmail, com
Organization Signature: <u>Andrew Prev</u>	Date:
Printed Name: Andrea Pile	
Title: <u>Co- manager</u>	
The Alaska Club Wellness Partnership Representative Name: 📉 🥆	acy Loite
Phone Number: 458 - 1747 Fax Number:	
	Email: taloite @ the alaskaclub.com
The Alaska Club Signature: Qual Cult	Date: <u>5-12-</u> 10
Printed Name: Tracy Loite	
Title: Membership Courdinate	
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