



THE ALASKA CLUB

Wellness Partnership

The Alaska Club agrees to assist IFCN/Preventure
by providing the following wellness package to their (Organization Name)
Network :
(Employees, team members, etc.)

Start Date: 7/15/16

Renewal Date: 7/15/17

Wellness Calendar

☐ Onsite

_____ 1st Qtr
_____ 2nd Qtr
_____ 3rd Qtr
_____ 4th Qtr

☐ Open House

_____ 1st Qtr
_____ 2nd Qtr
_____ 3rd Qtr
_____ 4th Qtr

☐ Fitness Party

_____ 1st Qtr
_____ 2nd Qtr
_____ 3rd Qtr
_____ 4th Qtr

☐ Fitness Challenge

_____ 1st Qtr
_____ 2nd Qtr
_____ 3rd Qtr
_____ 4th Qtr

☐ Fitness Seminar

_____ 1st Qtr
_____ 2nd Qtr
_____ 3rd Qtr
_____ 4th Qtr

☐ Wellness Fair

Date _____
Date _____
Date _____
Date _____

The Alaska Club agrees to offer the following membership benefits to each Network of
IFCN/Preventure available during each wellness activity.

Benefits to Employees:

ZERO enrollment

First month of membership dues FREE

Two months FREE of Corporate Membership Plus

Available during events, onsite or open house periods only.
1 year agreement / fee for early cancellation required.

IFCN/Preventure

agrees to promote events in the following manner:

- ☒ Promote via organization website, intranet or newsletter
- ☒ Posters to announce onsite date(s)

All promotional materials to be approved and provided by
The Alaska Club.





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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 Network's The Alaska Club membership can have a significant impact on their energy, health and their focus. Organizations that subsidize their employee memberships agree to give The Alaska Club Member Accounting (337-9550 ext. 1124) sixty-day prior notice to discontinuing the subsidy of membership dues for its Network in general.

IFCN/Preventure 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 Network prior to this notification. All Network are individually responsible for cancelling their membership commitment.

IFCN/Preventure subsidizes/reimburses their Network's membership(s) at the amount of N/A per individual membership.

Organization Name: IFCN/Preventure

Address: 2000 Nooseneck Hill Road/Coventry RI 02816

Contact Name: Jennifer Sassi

Phone Number: (401)385-3318

Fax Number: (401)385-9320

Email: jsassi@preventure.com

Billing Contact (if applicable): N/A

Phone Number: N/A

Fax Number: N/A

Email: N/A

Organization Signature: *Jennifer Sassi*

Date: 7-18-2016

Printed Name: Jennifer Sassi

Tom O'Hara

Title: Director

The Alaska Club Wellness Partnership Representative Name: Dody Donn

Phone Number: (907)330-0178

Fax Number: (907)344-5653

Email: ddonn@thealaskaclub.com

The Alaska Club Signature: _____

Date: 7/15/16

Printed Name: Dody Donn

Title: Membership Manager

