



THE ALASKA CLUB

Wellness Partnership

Northern Excavation

Start Date: 08/18/2015

Renewal Date: 08/18/2016

The Alaska Club agrees to assist _____ Northern Excavation _____ by providing the following wellness package to their employees: _____
(Organization Name)

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 employee of _____ Northern Excavation _____ available during each wellness activity.
(Organization Name)

Benefits to Employees:

One month of FREE membership dues

Two months of Membership Plus FREE

\$0 Enrollment

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

Northern Excavation

(Organization Name)

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.



THE ALASKA CLUB

Wellness Partnership

Helping Employees With the Cost of Membership at The Alaska Club

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 employees' The Alaska Club membership can have a significant impact on employee energy, health and their focus on serving your customers. Organizations that subsidize their employee memberships agree to give The Alaska Club Member Accounting (337-9550 ext. 1142) sixty day prior notice to discontinuing the subsidy of membership dues for its employees in general. Northern Excavation 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 employees prior to this notification. All employees are individually responsible for cancelling their membership commitment. Northern Excavation subsidizes/reimburses their employee's memberships at the amount of 0 per individual membership.

Organization Name: Northern Excavation

Address: PO Box 672178 Chugiak, AK 99567

Contact Name: Jon Semon - Owner

Phone Number: 694-1373 **Fax Number:** 688-1374 **Email:** northernexcavation@ymail.com

Billing Contact (if applicable): Jon Semon

Phone Number: 694-1373 **Fax Number:** 688-1374 **Email:** northernexcavation@ymail.com

Organization Signature: Signed Copy Attached **Date:** 08/18/2015

Printed Name: Jon Semon

Title: Owner

The Alaska Club Wellness Partnership Representative Name: Sila Adkins

Phone Number: 365-7321 **Fax Number:** 694-2393 **Email:** sadkins@thealaskaclub.com

The Alaska Club Signature: [Signature] **Date:** 08/18/2015

Printed Name: Sila Adkins

Title: Sales Coordinator

WITNESS PARTNERSHIP FOR NORTHERN EXCAVATION

Owner's Jon Semon and Leslie Hyman

Employees of Northern Excavation:

Ryan Semon

Cody Bowers

Nate Shafer

Rand Bigalow

Richard Shafer

Ben Stephens

Brett Lang

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Address: PO BOX 672178 Chugiak, AK 99567

Contact Name: Jon Semon - Owner

Phone Number: 694-1373 Fax Number: 688-1374 Email: northernexcavation@gmail.com

Billing Contact (if applicable): Jon Semon

Phone Number: 694-1373 Fax Number: 688-1374 Email: northernexcavation@gmail.com

Organization Signature: [Signature] Date: 8-18-15

Printed Name: Jon Semon

Title: Owner

The Alaska Club Wellness Partnership Representative Name: Sila Adkins

Phone Number: 365-7321 Fax Number: _____ Email: sadkins@thealaskaclub.com

The Alaska Club Signature: [Signature] Date: 18 AUG 2015

Printed Name: Sila Adkins

Title: Sales Coordinator

Wellness Partnership

Start Date: 18 Aug 2015 Renewal Date: 18 Aug 2016

The Alaska Club agrees to assist Northern Excavation by providing the following wellness package to their employees: (Organization Name)

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 employee of Northern Excavation available during each wellness activity.
(Organization Name)

Benefits to Employees:

One month free member.
dues
Two months free of
membership Plus

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