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Wellness Partnership

The Alaska Club agrees to assist AKUCS te (Organization Name) by providing the following wellness package to their employees: (Employees, team members, etc.)		Start Date:	
Wellness Calendar			
☐ Onsite	☐ Open House	☐ Fitness Party	
1st Qtr	1st Qtr	1st Qtr	
2nd Qtr	2nd Qtr	2nd Qt	
3rd Qtr	3rd Qtr	3rd Qt	
4th Qtr	4th Qtr	4th Qtr	
☐ Fitness Challenge	☐ Fitness Seminar	■ Wellness Fair	
1st Qtr	1st Qtr	Date	
2nd Qtr	2nd Qtr	Date	
3rd Qtr	3rd Qtr	Date	
4th Qtr	4th Qtr	Date	
Benefits to Employees:			
Beliesirs in Eurhinages:	☐ Promote via orga ☐ Posters to annou	nte events in the following manner: nization website, Intranet or newsletter nce onsite date(s) enals to be approved and provided by	

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WELLNESS PARTNERSHIP

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the following wellness package to their employees, team commons, etc.):	Renewal Date:
Should you choose to, covering some or all of the cost of your em	place 's The Alaska Club membership can have a
significant impact on their energy, health and their focus.	
and the property of the proper	e for whom it pays a subsidy is no longer employed there
and shall be responsible for the dues subsidy of terminated _en	10/04ee prior to this notification.
All emolones are individually responsible for cancelling the	
	t of per individual membership /
per family membership.	
Benefits to Employees:	
\$0 Enrollment, 1st and 6th Months of Membership Dues Free, 3 Months of Good Life Free*, 1 Month of Team Training Free. Non-Fitness Offer: 1 Month Free Tan & Massage Plus or Good Life*	Agrees to promote events in the following manner: Promote via organization website, intranet or newsletter
*in available markets.	Promote via organization website, intransic of newsletter Posters to announce onsite date(s) All promotional materials to be approved and provided by The Alaska Club.
Organization Name: AKUL Ste	W
O'Guille Control of the Control of t	
Address: 2891 Polar Bar Dr	
Contact Name: Ron 3 Leven 5	Email: Ron5 & Alswaste, com
Phone Number: 355 - 038 Fax Number:	Email: KO/I.) BJ/JH 3000/C/CO/C
Billing Contact (if applicable):	Email:
Phone Number: Fax Number:	Cinali:
Organization Signature:	Date: 8/2 (-17_
Printed Name: Kon Steven S	
090000	
Title: Operations Manager	7
The Alaska Club Wellness Partnership Representative Name: 🥥	Ruma Marke
Phone Number: 907-864-7/37 Fax Number:	-,
The Alaska Club Signature: Lyn Mark	Date: 8-21-17
Printed Name: Lynn MARKS	
Title: Membership Courdinato	or
Comment	

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Subsidizing or partially subsidizing the cost of a The Alaska Club membership is	completely antional Chauld
choose to, covering some or all of the cost of your employee's The Alaska significant impact on their energy health and their face.	a Club mambarable and beauty
significant impact on their energy, health and their focus. Organizations that sub-	sidire their employees make a
agree to give the Alaska Club Member Accounting (337-9550 ext 1124) gives done	sidize trieff employee memberships
or monibership dues for its EVVO (SACE) in general	
will notify The Alaska Club if anyone for whom it pa	NO 2 Cuboldy is an Israel
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are individually responsible for cancelling their	membarahin aia-
AK Waste subsidizes/reimburses their d's n	membership continuent.
per individual membership / per family membership.	membership(s) at the amount of
Organization Name: AK () CAST-R	•
Address: 280) Polar Bear Or	
Contact Name: Ron Stevens	
Phone Number: 355-0038 Fax Number:	Emalle Page of AV.
pumig contact (it applicable):	
Phone Number: Fax Number:	Email:
Organization Signature:	Date: \$ /2/12
Printed Name: Ron Stevens	Date: 8/21/17
Printed Name: Ron Stevens	Date: 8/21/17
Printed Name: Ron Stevens Title: Operations manager	
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