



THE ALASKA CLUB

Wellness Partnership

ANP Family Psychiatry LLC

Start Date: 10/16/2015

Renewal Date: 10/16/2016

The Alaska Club agrees to assist ANP Family Psychiatry LLC 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 ANP Family Psychiatry LLC available during each wellness activity. (Organization Name)

Benefits to Employees:

_____ \$0 Enrollment
_____ 1st Month Free
_____ 2 Months Free Membership Plus
_____ \$20/\$30 Fitness Consultation

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

ANP Family Psychiatry LLC

(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.



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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. ANP Family Psychiatry LLC 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. ANP Family Psychiatry LLC subsidizes/reimburses their employee's memberships at the amount of \$0 per individual membership.

Organization Name: ANP Family Psychiatry LLC

Address: 851 E Westpoint Drive Wasilla, Alaska

Contact Name: Bryan Mcinnis

Phone Number: 907-632-7577 Fax Number: 907-522-4557 Email: bryanmcinnis@icloud.com

Billing Contact (if applicable): _____

Phone Number: _____ Fax Number: _____ Email: _____

Organization Signature: *Bryan Mcinnis* Date: 10/16/2015

Printed Name: Bryan Mcinnis

Title: Head Counselor

The Alaska Club Wellness Partnership Representative Name: Damian Remijio

Phone Number: 907-365-7327 Fax Number: 907-694-2393 Email: dremijio@thealaskaclub.com

The Alaska Club Signature: *[Signature]* Date: 10/16/2015

Printed Name: Damian Remijio

Title: Interim Membership Manager