



THE ALASKA CLUB

Corporate Wellness Partnership

Kaladi Brothers Coffee

Start Date: 11/06/2014

Renewal Date: 11/05/2015

The Alaska Club agrees to assist Kaladi Brothers Coffee by providing the following wellness package to their employees: *(Company 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
December 12, 2014 4th Qtr

☐ Wellness Fair

Date _____
Date _____
Date _____
Date _____

The Alaska Club agrees to offer the following membership benefits to each employee of Kaladi Brothers Coffee available during each wellness activity.
(Company Name)

Benefits to Employees:

First 30 days of membership dues FREE

\$0 enrollment fee

2 months of Membership Plus free

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

Kaladi Brothers Coffee

(Company Name)

agrees to promote events in the following manner:

- ☒ Promote via company 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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Subsidizing Corporate Membership

Companies that subsidize their employee memberships agree to give The Alaska Club Member Accounting (337-9550 ext. 1142) 60 day prior notice to discontinuing the subsidy of membership dues for its employees in general.

Kaladi Brothers Coffee _____ 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.

Kaladi Brothers Coffee _____ subsidizes/reimburses their employee's memberships at the amount of \$0 _____ per individual membership.

Business Name: Kaladi Brothers Coffee _____

Address: 6921 Brayton Dr. Suite 201 Anchorage, AK 99507 _____

Contact Name: Michele Parkhurst _____

Phone Number: 907-644-7405 **Fax Number:** 866-893-4708 **Email:** michele@kaladi.com _____

Billing Contact (if applicable): Same _____

Phone Number: _____ **Fax Number:** _____ **Email:** _____

The Alaska Club contact information: The Alaska Club East 5201 E. Tudor Road Anchorage, AK 99507 _____

Corporate Wellness Representative Name: David Dowd & Mandi Corbin _____

Phone Number: 330-0162 or 330-0189 **Fax Number:** 337-5865 **Email:** mcorbin@thealaskaclub.com _____

Company Signature: Michele Parkhurst **Date:** 11/10/14

The Alaska Club Signature: Mandi Corbin