

## **Wellness Partnership**

| - Alidovald Sura Double  | 9 11/6/15             |
|--|-----------------------|
| The Alaska Club agrees to assist Midnight Sun Palo   | Start Date: 11/3/13   |
| by providing the following wellness package to their PEOPLE (Employees, team members, etc.): | Renewal Date: 11/5/10 |
|  |                       |

## Wellness Calendar

| Onsite                    | Open House                              | Fitness Party           |
|---------------------------|---|-------------------------|
| 1st Qtr                   | 1st Qtr                                 | 1st Qtr                 |
| 2nd Qtr                   | 2nd Qtr                                 | 2nd Qti                 |
| 3rd Qtr                   | 3rd Qtr                                 | 3rd Qtr                 |
| 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                    |
| The Alaska Club agrees to | offer the following membership benefits | to each employee of     |
| Brei                      | wing CO. available during               | each wellness activity. |

| Benefits to Employees:  |
|---|
| # 0 Enpollment  |
| First month Dues Free   |
| TWO MONTHS Membership Dlys  |
| *\$20/\$30 coaching Session FRE   |
|   |
| Available during events, onsites or open house periods only 1 year agreement / fee for early cancellation required. |

| EXAMPLE   |
|---|
| 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<br>The Alaska Club |



## THE ALASKA CLUB Corporate Agreement

| Subsidizing or partially subsidizing the cost of a The Alaska Club membership  |   |
|--|---|
| choose to, covering some or all of the cost of your employee 's The Ala  | ska Club membership can have a              |
| significant impact on their energy, health and their focus. Organizations that s   | ubsidize their employee memberships         |
| agree to give The Alaska Club Member Accounting (337-9550 ext. 1124) sixty-da  | y prior notice to discontinuing the subsidy |
| of membership dues for its read PloyeeSin general.   |   |
| EXAMPLE BYEWING CO. 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 PEOPLE  | <u>= EMPIOUEE</u> prior to this             |
| notification. All provided are individually responsible for cancelling the   | eir membership commitment.                  |
| EXAMPLE Midnight SUN subsidizes/reimburses their EMPloyee  | 's membership(s) at the amount of           |
| per individual membership.   |   |
|  | 0.0   |
| Organization Name: EXAMPLE Midright Sun Breu   |   |
| Address: 8111 Diamond Hook Drive Anch  | orage AK 99507                              |
| Contact Name: <u>Jamie Schmitt</u>   |   |
| Dhone Number (00) 7/1/ -1170 For Number  | E   |
| Phone Number: (901) 5777 1177 Fax Number:  | Email: Octy nelco                           |
| Phone Number: (907) 344-1179 Fax Number:   | midnightsun brewing com                     |
| Billing Contact (if applicable):   |   |
| Billing Contact (if applicable):   |   |
| Phone Number: Fax Number:  | Email:                                      |
| Phone Number: Fax Number: Organization Signature: family children  | Email:                                      |
| Phone Number: Fax Number:  Organization Signature: James Schmitt.  Printed Name: Schmitt.  | Email: Date: 11/5/2015                      |
| Phone Number: Fax Number: Organization Signature: family children  | Email: Date: 11/5/2015                      |
| Phone Number: Fax Number:  Organization Signature: James Schmitt.  Title: Manager.  The Marke Club Wellness Partnership Representative Name: Processor Company (1988).   | Email:                                      |
| Phone Number: Fax Number:  Organization Signature: James Schmitt.  Title: Manager.  The Marke Club Wellness Partnership Representative Name: Processor Company (1988).   | Email:                                      |
| Phone Number: Fax Number:  Organization Signature: James Schmitt.  Title: Manager .  | Email:                                      |
| Phone Number: Fax Number: Organization Signature: Chmit  Printed Name: Sumit  Title: Manager .  The Alaska Club Wellness Partnership Representative Name: Phone Number: Fax Number: /  | Email:                                      |
| Phone Number: Fax Number:  Organization Signature: Chmit  Printed Name: Schmit .  Title: Manager .  The Alaska Club Wellness Partnership Representative Name: Phone Number: Fax Number: The Alaska Club Signature: Manager . | Email:                                      |
| Phone Number: Fax Number: Organization Signature: Chmit  Printed Name: Sumit  Title: Manager .  The Alaska Club Wellness Partnership Representative Name: Phone Number: Fax Number: /  | Email:                                      |