

Wellness Partnership

The Alaska Club agrees to assist Schneider & Associates	Start Date: 12/27/17
(Organization Name)	Otale Date,
by providing the following wellness package to their Employees	Renewal Date: 12/27/18
(Employees, team members, cla.)	
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Wellness Calendar

	Onsite	Open House	☐ Fitness Party
	1st Qtr3rd Qtr3rd Qtr4th Qtr	1st Qtr2nd Qtr3rd Qtr4th Qtr	1st Qtr2nd Qtr3rd Qtr4th Qtr
	Fitness Challenge	☐ Fitness Seminar	☐ Wellness Fair
	1st Qtr	1st Qtr	Date
	2nd Qtr	2nd Qtr	· Date
	3rd Qtr	3rd Qtr	Date
ū	4th Qtr	4th Qtr	Date

Benefits to Employees:

\$0 Enrollment
1st Month of Dues for Free
2 Months of Membership Plus for Free
\$20/\$30 Fitness Coaching Session Fee Due
at Sign Up

Schneider & Associates

agrees to promote events in the following manner:

- D Promote via organization website, intranet or newsletter
- ☐ Posters to announce onsite data(s)
- All promotional materials to be approved and provided by The Alaska Club.





Substitizing or partially substitizing the cost of a The Alaska Club member	ership is completely optional. Should you
choose to, covering some or all of the cost of your Employee 's Th	e Alaska Club membershin can baya a
significant impact on their energy, health and their focus. Organizations t	that subsidize their employee membershine
agree to give The Alaska Club Member Accounting (337-9550 ext. 1124) six	kty-day prior notice to discontinuing the suboldy
of membership dues for its Employees in general,	ay and prior nemotics discontinuing the supsidy
Schneider & Associates will notify The Alaska Club if anyone for who	om it nava a subsidu je no longer
employed there and shall be responsible for the dues subsidy of terminated	Employee prior to this
notification, All Employees are individually responsible for cancelling	
Schneider & Associates subsidizes/reimburses their Employee	's membership(s) at the amount of
\$99 per individual membership / n/a per family memi	the different of
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Organization Name: Schnelder & Associates .	2/
Address: 8811 Toloff St. Anchorage, Alaska 99507 101 W. Be	inson Blud. Suite 306. Anchorog
Contact Name: Karln Schaetze	AK 99503'
Phone Number: 907-561-2135 Fax Number:	Email: kschaelze@sestructural.com
Billing Contact (if applicable):	
Phone Number: Fax Number:	Email:
Organization Signature: M. Schar	Date: 12/27/17
Printed Name: Karin Schaetze	4 a 8
sitte: Administrative Assistant	
White Walnut	· · ·
he Alaska Club Wellness Partnership Representative Name: Sch	nuyler Burke
Phone Number: 907-264-2718 Fax Number:	Email: sburke@thealaskaolub.com
0111	7
he Alaska Club Signature:	Date: 12/27/17
rinted Name: Schuyler Burke	Dato:
itle: Membership Manager	
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