



THE ALASKA CLUB

Corporate Wellness Partnership

Midwifery and Women's Health Care

Start Date: 04/17/2014

Renewal Date: 04/16/2015

The Alaska Club agrees to assist Midwifery and Women's Health Care 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

Zumba 5/10/14
& Insanity
6pm

_____ 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 Midwifery and Women's Health Care available during each wellness activity.
(Company Name)

Benefits to Employees:

\$0 Enrollment

30 days FREE of Membership Dues

2 Months FREE of Corporate Benefits Package (Membership Plus)

Fitness Consultation Deposit of \$20/\$30 (Ind./Family) required at the sign up

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

Midwifery and Women's Health Care
(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.



THE ALASKA CLUB

Corporate Wellness Partnership

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.

Midwifery and Women's Health Care 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.

Midwifery and Women's Health Care subsidizes/reimburses their employee's memberships at the amount of Gold fitness Individual per individual membership.

Business Name: Midwifery and Women's Health Care

Address: 3730 Rhone Circle Suite 101

Contact Name: Claire Norton-Cruz

Phone Number: 907-561-5152 **Fax Number:** 907-562-2585 **Email:** clairecnc@hotmail.com

Billing Contact (if applicable): Claire Norton-Cruz

Phone Number: 907-561-5152 **Fax Number:** 907-562-2585 **Email:** clairecnc@hotmail.com

The Alaska Club contact information: The Alaska Club East

Corporate Wellness Representative Name: Vicadel Magalong

Phone Number: 907-330-0147 **Fax Number:** 907-337-5865 **Email:** vmagalong@thealaskaclub.com

Company Signature:

Date:

4/17/14

The Alaska Club Signature: