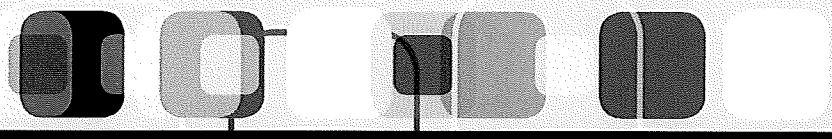


THE ALASKA CLUB

# Corporate Wellness Partnership

St.Clair Dental Lab

Start Date: 8/13/2012 Renewal Date: 8/12/2013

The Alaska Club agrees to assist St.Clair Dental Lab by providing the following wellness package to their employees:
COMPANY NAME

## WELLNESS CALENDAR

| | | | | | |
|---|---|---|---|---|---|
| ☐ Wellness Fair | | 1st Qtr | ☐ Fitness Party | | 1st Qtr |
| | | 2nd Qtr | | | 2nd Qtr |
| | | 3rd Qtr | | | 3rd Qtr |
| | | 4th Qtr | | | 4th Qtr |
| ☐ Fitness Challenge | | 1st Qtr | ☐ Fitness Seminar | | 1st Qtr |
| | | 2nd Qtr | | | 2nd Qtr |
| | | 3rd Qtr | | | 3rd Qtr |
| | | 4th Qtr | | | 4th Qtr |
| ☐ Onsite | | 1st Qtr | ☑ Open House | 3/1 to 3/8/2013 | 1st Qtr |
| | | 2nd Qtr | | 6/3 to 6/14/2013 | 2nd Qtr |
| | | 3rd Qtr | | 8/16 to 9/01/2012 | 3rd Qtr |
| | | 4th Qtr | | 12/3 to 12/10/2012 | 4th Qtr |

The Alaska Club agrees to offer the following membership benefits to each employee of St.Clair Dental Lab available during each wellness activity.
COMPANY NAME

**Benefits to Employees:**

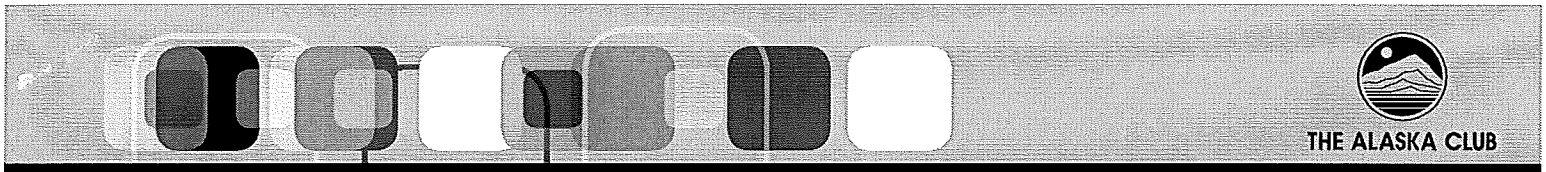
- $0 enrollment during the entire enrollment period
- First Month of Membership Dues free (w/1 yr. commitment)
- 2 months of Membership Plus Benefits Free
- Month to Month memberships available
- ($20/30 Fitness Consultation Required At Sign Up)

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

St.Clair Dental Lab
COMPANY NAME
**agrees to promote events in the following manner:**

- ☐ Promote via company website, intranet or newsletter
- ☒ Posters to announce On-Site 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 142) 60 day prior notice to discontinuing the subsidy of membership dues for its employees in general. _____ 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.

St. Clair Dental Lab subsidizes/reimburses their employee's memberships at the amount of
COMPANY NAME
0 per individual membership.

The Alaska Club agrees to provide two weeks of digital signage and a newsletter feature for subsidizing their employee memberships.

Business Name: St. Cair Dental Lab
Address: 3803 Mc. Cain Loop
Contact Name: Ken Clester
Phone number: 230-7408 Fax number: _____ Email: _____
Billing Contact (if applicable): Karen Clester
Phone number: 230-7408 Fax number: _____ Email: _____

The Alaska Club contact information: The Alaska Club West
Corporate Wellness Representative Name: Bobbi Williams
Phone number: 264-2703 Fax number: _____ Email: _____

Company Signature: _____ Date: 8/13/12
The Alaska Club Signature: Bobbi Williams