



THE ALASKA CLUB

Corporate Wellness Partnership

SoundWorks Car Audio and Security

Start Date: 03/06/2014

Renewal Date: 03/06/2015

The Alaska Club agrees to assist SoundWorks Car Audio and Security 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
_____ 4th Qtr

☐ Wellness Fair

Date _____
Date _____
Date _____
Date _____

The Alaska Club agrees to offer the following membership benefits to each employee of SoundWorks Car Audio and Security available during each wellness activity.
(Company Name)

Benefits to Employees:

\$0 Enrollment

1st Month Membership Dues Free

2 Months Free Membership Plus

(\$20/\$30 Fitness Consultation Fee Due at Sign up)

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

SoundWorks Car Audio and Security

(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.

SoundWorks Car Audio and Security 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.

SoundWorks Car Audio and Security subsidizes/reimburses their employee's memberships at the amount of TBA per individual membership. *gold family*

Business Name: SoundWorks Car Audio and Security

Address: 3404 Arctic Blvd. Anchorage, AK 99503

Contact Name: Jon Murphy

Phone Number: 569-1212 **Fax Number:** 569-1213 **Email:** info@soundworksak.com

Billing Contact (if applicable): _____

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

The Alaska Club contact information: The Alaska Club Downtown

Corporate Wellness Representative Name: Bryan Lance

Phone Number: 907-365-7318 **Fax Number:** _____ **Email:** Blance@thealaskaclub.com

Company Signature: _____ **Date:** _____

The Alaska Club Signature: *[Signature]* _____



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_____ 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.

Gold family subsidizes/reimburses their employee's memberships at the amount of _____ per individual membership.

Business Name: Soundworks LLC

Address: 3404 Arctic Blvd

Contact Name: Jon Murphy

Phone Number: 907-569-1212 Fax Number: _____ Email: Jon@soundworksak.com

Billing Contact (if applicable): _____

Phone Number: _____ Fax Number: _____ Email: _____

The Alaska Club contact information: _____

Corporate Wellness Representative Name: _____

Phone Number: _____ Fax Number: _____ Email: _____

Company Signature: [Signature] Date: 3-24-14

The Alaska Club Signature: _____

Corporate Card
for Sandviks



Print Name: _____

Member Number: _____

THE ALASKA CLUB

Agreement for Payment of Membership Account

This Agreement is considered a part of the Membership Agreement whose terms are incorporated herein by reference.

Please choose one of the following options for payment of your membership dues, charges and other fees.

1. Auto Pay by EFT (Checking Account)

PLEASE INCLUDE A VOID CHECK
(Provides necessary bank information)

2. Auto Pay by Credit Card

NAME: Jonathan Murphy
(as it appears on credit card)

Visa / Master Card / Amex

CARD: 5581 / 3400 / 7600 / 8800

EXPIRATION DATE: 11 / 2015

I, the undersigned, authorize The Alaska Club to charge my club billing to the checking account or credit card indicated above. I agree to the Automatic Payment terms and conditions listed below.

Signature: _____

Date: 3-24-14

Auto Pay Terms and Conditions

As an enrollee in this program, I understand that:

1. My monthly statement will show an Automatic Payment (EFT or Credit Card Draft) posted on the last day of the billing cycle, even though the transaction will actually be processed within the first 10 days of the following month.
2. If my Automatic Payment is declined for any reason a \$20 return fee will be applied to my account. The Alaska Club will attempt to contact me to make alternative payment arrangements. If I cannot be contacted or do not make alternative payment arrangements, my account will be subject to normal credit procedures for non payment.
3. If my Automatic Payment is returned due to closed account, stopped payment, invalid bankcard information or if my Payment has declined twice in a 12 month period, The Alaska Club will terminate my Auto Pay service and set my account up for Direct Billing to Member (related fees apply).
4. If my Automatic Payment information changes for any reason, including expiration dates, I will notify The Alaska Club of the new account information. If I fail to provide this information prior to the due date and The Alaska Club is unable to process my payment, I will be responsible for an alternative payment arrangement and any return or late fees which may result.
5. The Alaska Club is authorized to collect all funds due prior to the effective date of cancellation. I will notify The Alaska Club in writing if I wish to terminate this agreement.

Auto Pay Statement Options (Initial One)

☒ a. Paperless Statements. Email Address: _____

My monthly statement will be available online at www.thealaskaclub.com. I will be responsible for reviewing my statement monthly and notifying The Alaska Club of any changes to my email address, mailing address or phone numbers. Email address must be provided when selecting this option.

☐ b. Mailed Statements. Monthly Statement fee applies.

A monthly statement will be mail to me even though I am on the automatic payment plan. I understand a \$4 Statement Fee will be applied to my account monthly.

3. Direct Billing to Member

I, the undersigned, authorize The Alaska Club to charge my membership account the \$10 Direct Billing Set Up Fee and \$4 Monthly Statement Fee. The Alaska Club will mail me monthly statements. I understand payments are due on the 1st of each month and that a late fee will be assessed if no payment is received at The Alaska Club by the 25th of the month.

Signature: _____

Date: _____