THE ALASKA CLUB

Corporate Wellness Partnership

Start Date: 2/9/14 Renewal Date: 2/9/15

The Alaska Club agrees to assist Aurora Glass (Company Name) by providing the following wellness package to their employees:

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 Aurora Glass (Company Name) available during each wellness activity.

Benefits to Employees:

$0 Enrollment
1st month free
2 months of memt

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

Aurora Glass (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. Aurora glass 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.

$0 subsidizes/reimburses their employee's memberships at the amount of N/A per individual membership.

Business Name: Aurora glass

Address: 1025 ORCA ST #5N Anchorage AK 99501

Contact Name: Holli DeLucia

Phone Number: 277-1058 **Fax Number:** _____ **Email:** auroraglass@acsalaska.net

Billing Contact (if applicable): Holli DeLucia

Phone Number: 277-1058 **Fax Number:** _____ **Email:** "

The Alaska Club contact information: Anthony DeLucia

Corporate Wellness Representative Name: ~~Dan~~ Alex Troxtell

Phone Number: 907-365-7329 **Fax Number:** 9076942393 **Email:** atroxtell@thealaskaclub.com

Company Signature: _____ **Date:** 2-9-14

The Alaska Club Signature: _____