

Wellness Partnership

The	Alaska Club agrees to assist W	asilla Chamber of Commerce (Organization Name)	Start Date: <u>3-14-19</u>
by	providing the following wellness p	package to their members (Employees, team members, etc.)	Renewal Date: 3-13-20
		Wellness Calendar	
	Onsite	☐ Open House	☐ Fitness Party
	1st Qtr	1st Qtr	1st Qtr
	2nd Qtr	2nd Qtr	2nd Qtr
	3rd Qtr	3rd Qtr	3rd Qtr
	4th Qtr	4th Qtr	4th Qtr
	Fitness Challenge	☐ Fitness Seminar	☐ Wellness Fair
	1st Qtr	1st Qtr	Date
	2nd Qtr	2nd Qtr	Date
	3rd Qtr	3rd Qtr	Date
	4th Qtr	4th Qtr	Date

Benefits to Employees:

Zero enrollment One month free dues Two months Membership Plus package free \$20/30 Fitness Consultation required

Wasilla Chamber of Commerce

agrees to promote events in the following manner:

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











	g the cost of a fine Alaska Club membe	ership is completely optional. Should you
choose to, covering some or all of	the cost of your employee 's The	e Alaska Club membership can have a
		that subsidize their employee memberships
		ty-day prior notice to discontinuing the subsidy
of membership dues for its membership	ers in general.	3
Wasilla Chamber of Commerce W	ill notify The Alaska Club if anyone for who	om it pays a subsidy is no longer
	nsible for the dues subsidy of terminated	
notification. All members	are individually responsible for cancelling	ng their membership commitment.
Wasilla Chamber of Commerce St	ibsidizes/reimburses their employee	's membership(s) at the amount of
O per individual memi	bership / 0 per family mem	bership.
Organization Name: Wasilla C	hamber of Commerce	
Address: 415 E. Railroad Ave V	Vasilla AK 99654	
	STA.	
Phone Number: 907-376-1299	Fax Number:	Email: jessica@wasillachamber.org
Billing Contact (if applicable).	
Phone Number:	Fax Number:	Email:
Organization Signature:		Date: 3 14 2019
Printed Name: Jessic	a Viera	
	\	
Title: <u>Executive</u>]	Director	Proposition of the Contract of
	tnership Representative Name: Ja	
The Alaska Club Wellness Par	tnership Representative Name: Ja	
The Alaska Club Wellness Par Phone Number: 907-264-2725	tnership Representative Name: Ja Fax Number:	ay Millington Email: jmillington@thealaskaclub.com
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The Alaska Club Wellness Part Phone Number: 907-264-2725 The Alaska Club Signature: Printed Name: Jay Millington	tnership Representative Name: _Ja Fax Number:	ay Millington Email: jmillington@thealaskaclub.com
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The Alaska Club Wellness Part Phone Number: 907-264-2725 The Alaska Club Signature: — Printed Name: Jay Millington Title: Corporate Membership Co Comment Zero enrollment One month dues free Two months of Membership	tnership Representative Name: January Fax Number: Fax Number:	ay Millington Email: jmillington@thealaskaclub.com
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