THE ALASKA CLUB

Wellness Partnership

The Alaska Club agrees to assist Temsco
(Organization Name)
by providing the following wellness package to their Employees:
(Employees, team members, etc.)

Start Date: 5/9/2016

Renewal Date: 5/8/2017

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 Employees of Temsco available during each wellness activity.

Benefits to Employees:

$0 Enrollment on Month to Month Memberships

1st Month of Membership Plus Free w/ 6 month agreement

*Fitness consultation required $20/$30 - Ind/Couple

**60 Day notice to cancell

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

Temsco

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.

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Corporate Agreement

Subsidizing or partially subsidizing the cost of a The Alaska Club membership is completely optional. Should you choose to, covering some or all of the cost of your Employees **'s The Alaska Club membership can have a significant impact on their energy, health and their focus.** Organizations that subsidize their employee memberships agree to give The Alaska Club Member Accounting (337-9550 ext. 1124) sixty-day prior notice to discontinuing the subsidy of membership dues for its Employees in general.

Temsco 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.

Temsco subsidizes/reimburses their Employees 's membership(s) at the amount of _____ per individual membership.

Organization Name: Temsco

Address: _____

Contact Name: _____

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

Billing Contact (if applicable): _____

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

Organization Signature: _____ **Date:** _____

Printed Name: _____

Title: _____

The Alaska Club Wellness Partnership Representative Name: Cameron Mitchell

Phone Number: 907-364-4317 **Fax Number:** _____ **Email:** cmitchell@thealaskaclub.com

The Alaska Club Signature: Cameron Mitchell Digitally signed by Cameron Mitchell DN: cn=Cameron Mitchell, o, ou, email=cmitchell@thealaskaclub.com, c=US Date: 2016.04.13 10:48:44 -08'00' **Date:** 4/13/2016

Printed Name: Cameron Mitchell

Title: Corporate Wellness Coordinator