

## **WELLNESS PARTNERSHIP - LEVEL 3**

The Alaska Club agrees to assist AT & T	(organization name), by providing the following
wellness package to their Employees (employees, team members, etc.). Should you choose to cover	
some or all the cost of Employees (s) me	embership, The Alaska Club membership can have a significant
impact on their energy, health, and their focus	AT & T will notify The Alaska Club if anyone
whom it pays a subsidy is no longer employed there and shall be responsible for the dues subsidy of terminated	
	I Employees (s) are individually responsible
for cancelling their membership commitment.	
	embership(s) at the amount of\$0 per
individual Membership / per family men	nbership.
This wellness partnership may be cancelled with a 30-day notice after a year from the effective date of: 8/26/25	
Benefits to	Employees:
″ \$0 Enrollment	
<ul><li>1st Month of Membership Dues Free</li><li>2 Months of Membership Plus for Free</li></ul>	
Total Control of the	
Organization Name: AT & T	Address: 505 E Bluff Dr. Anchorage AK 99501
Contact Name: Clint Miller	Phone Number: 4069269460
Email: cm921b@att.com	Billing Contact (if applicable): SAME
Phone Number: 4069269460	
Organization Signature:	Date: 08/26/2025
Printed Name: Clint L Miller	Title: Area Director
TAC Representative Signature:	Date: 08/26/2025
The Alaska Club Wellness Partnership Representative: Jay	lei Roach Title: Sales Coordinator
Phone Number: 9073657326 Email: Jroach@thealaskaclub.com	
Comment:	
Fitness Consultation Fee Required	
Annual Fee Required	
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