

Corporate Wellness Partnership

| | | Papa Murphy's | |
|---|--|-------------------------------|---|
| | | Start Date: 12/15/2013 | Renewal Date: 12/14/2014 |
| he Alaska Club agrees to assi | et Papa Murphy's | | by providing the |
| ollowing wellness package to | | (Company Name) | by providing the |
| | Wellness | s Calendar | |
| ☐ Onsite | ☐ Ope | n House | ☐ Fitness Party |
| 1st Qtr | | 1st Qtr | 1st Qtr |
| 2nd Qtr | | 2nd Qtr | 2nd Qt |
| 3rd Qtr | | 3rd Qtr | 3rd Qt |
| 4th Qtr | | 4th Qtr | 4th Qtı |
| 1st Qtr 2nd Qtr 3rd Qtr | | 1st Qtr 2nd Qtr 3rd Qtr | Date Date Date |
| 4th Qtr | ************************************** | 4th Qtr | Date |
| Papa Murphy's | | wing membership benefits to | |
| Benefits to Employees: \$0 Enrollment | , | Papa Murphy's | Company Name) |
| 1st Month Free of Membership Due | es | ` | • • • |
| 2 months of Membership Plus *Fitness Consultation Fee Required \$20/\$ | 30 for Ind./Fam memberships | ☐ Promote via company | events in the following manner: website, intranet or newsletter |
| Available during a set assitute | an hausa nais da cali: | ☐ Posters to announce | • • • |
| Available during events, onsites or op 1 year agreement / fee for early cancella | | The Alaska Club. | s to be approved and provided by |



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| Companies that subsidize their employee ext. 1142) 60 day prior notice to disconting Papa Murphy's will notificate their employee will notificate their employee of the subsidized their employees will not the subsidized their employees of the subsidized the subsid | , - | for its employees in general. |
|--|--|--------------------------------|
| there and shall be responsible for the due individually responsible for cancelling their | s subsidy of terminated employees prio | |
| Papa Murphy's subsidize | es/reimburses their employee's membe | rships at the amount of \$0 |
| per individual membership. | | |
| | • | |
| | | |
| Business Name: Papa Murphy's | | |
| Address: 2286 Abbott Rd. | | |
| Contact Name: Jackie and Zacha | ry Fields | |
| Phone Number: (907) 929-7272 | Fax Number: | Email: |
| Billing Contact (if applicable): $\frac{N/A}{}$ | • | |
| Phone Number: N/A | Fax Number: N/A | Email: N/A |
| | | |
| The Alaska Club contact information: | The Alaska Club East | |
| Corporate Wellness Representative N | _{ame:} David Dowd and Vicade | el Magalong |
| Phone Number: (907) 330-0162 or (907) 330-0147 | Fax Number: (907) 337-5865 | Email: DDowd@thealaskaclub.com |
| | | |
| Company Signature: | hu Fold | Date: 2-11-14 |
| The Alaska Club Signature: | and lead | |