



# MEDI-WEIGHTLOSS®

## CORPORATE WEIGHTLOSS AND WELLNESS PARTNER ENROLLMENT FORM

Complete This Form to Schedule a Worksite Wellness Workshop.

Company Name: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ ZIP Code \_\_\_\_\_

Name (Primary Contact) \_\_\_\_\_ Business Phone \_\_\_\_\_

Email Address (Primary Contact) \_\_\_\_\_ Fax \_\_\_\_\_

Total Number of Employees \_\_\_\_\_ Number of Attendees (estimate) \_\_\_\_\_ Desired Date of Workshop \_\_\_\_\_

WORKSITE WELLNESS WORKSHOP INCLUDES	
20% DISCOUNT	Valid for initial and follow-up visits
ENROLLMENT & PARTICIPATION REPORTS	HIPAA-compliant reports let your company track the program's success
MONTHLY WELLNESS NEWSLETTERS	Topics include health, wellness, nutrition, and fitness
ONLINE REGISTRATION	Quick, easy way for employees to sign up
SIGNATURE PATIENT WEBSITE	Participants can track personal success, find delicious recipes, and create a workout plan.
MARKETING POSTERS	Promote a healthy workplace
CUSTOM WEBSITE FLYER	For use on employee benefit site
CUSTOM WELLNESS MONITOR ARTWORK	Promote Corporate Wellness on TV monitors (where applicable)
PROMOTIONAL ITEMS	Employees in attendance are eligible for drawings and prizes
BODY FAT ANALYSIS	Employees in attendance receive for free
EMPLOYEE DISCOUNT CARDS	Assist employees with registration and proof of employment
NUTRITIONAL EDUCATION	Access to our obesity management knowledge
HSA/FSA SPENDING	We accept most HSAs/FSAs; however, eligibility varies and you should consult your tax adviser
EMAIL TEMPLATES	Copy and paste content to promote Corporate Wellness

PLEASE SELECT ADDITIONAL ITEMS	
<input type="checkbox"/> CORPORATE WELLNESS CHALLENGE	Includes a Playbook (a step-by-step guide for holding a weight loss contest), Challenge Poster (to announce contest), and Tracking Poster (to display the weekly results)
<input type="checkbox"/> CORPORATE BRANDING	Your logo on patients' online accounts

**RETURN COMPLETED APPLICATION TO:**

**MAIL:** Medi-Weightloss®, Attn: Todd C. Bishop, Vice President of Corporate Wellness, 509 S. Hyde Park Ave., Tampa, FL 33606  
**FAX:** 813.228.6763 **EMAIL:** wellness@mediweightloss.com

**TO BE COMPLETED BY MEDI-WEIGHTLOSS® (PLEASE LIST ALL LOCATIONS THAT REQUIRE EMR VISIBILITY IF REGION-SPECIFIC.)**

EMR Visibility  National  State  Locations \_\_\_\_\_

Partner Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ Todd Bishop, VP of Corporate Wellness \_\_\_\_\_ Date \_\_\_\_\_

**FOR ADDITIONAL INFORMATION, CONTACT US AT 813.549.6364 OR VISIT US ONLINE AT [MEDIWEIGHTLOSS.COM](http://MEDIWEIGHTLOSS.COM).**

CORPORATE BRANDING – If selected, upon enrollment in the Corporate Weightloss and Wellness Partnership, you agree to grant to us the non-exclusive, non-assignable, non-sublicensable, royalty-free, limited license to use and display your trademark, service mark, trade name, and/or logo (collectively, the "Marks") on our mediweightloss.com website. You shall retain all right, title and interest in and to the Marks and nothing contained in this Agreement will be construed as conferring by implication, operation of law or otherwise, any other license or other right. All information requested is required before your enrollment will be considered. By enrolling in this program, your employees will be eligible for a discounted rate at any of our participating Medi-Weightloss® locations. Medi-Weightloss® reserves the right to cancel the Corporate Weight Loss and Wellness Program at any time.