



CORPORATE WELLNESS EVENT

REGISTRATION FORM

Club Name _____ **Company Name** _____

Contact Name _____ Work Phone _____

Email _____

Company Information

Number of Employees _____ Employee Disabilities ☐ Yes ☐ No

Dedicated Space Description: _____

Additional Information _____

Availability: Please list out your top (3) dates for the event:

1. _____
2. _____
3. _____

Wellness Event Options: Please check your topic for event.

- ☐ **Stress Management Seminar:** holding down a full time job leads to executives carrying a variety of stress. The stress of juggling a career and balancing your fitness needs seems impossible. Our team is here to teach you strategies on how to balance both and set your fitness goals for the year.
- ☐ **Mindful Eating:** busy and stressful lives cause healthy eating to become an afterthought. We will address how to develop awareness of your experiences, physical cues and feelings about food.
- ☐ **Yoga-At-Your-Desk:** our weeks are filled with routines and stress that increase our stress and decrease our mobility. We want to show you how to flip that script, decreasing stress and moving more efficiently while on the job.
- ☐ **Goal Setting:** failing to plan is planning to fail. Learn how to identify and create SMART goals to achieve your health and fitness goals.

Please return this form to your US Fitness representative once complete. If you have additional questions or concerns about your corporate wellness partnership, please email corpwellness@usfitnessgroup.com.

How **WELLthy** is your company?

