



Wellness Program Enrollment Form

Name: _____
(please print clearly)

Department: _____ Location/ Room #: _____

Phone number/extension: _____

E-mail address: _____

Note: If email communication is not accessible, please list preferred address to retain wellness materials and communications: _____

Please Circle Preferred Total Wellness Team Member Jacket, Size, & Color Below

Ladies Total Wellness Team Windbreak Jacket color **black** or **red**. Size XS, S, M, L, XL, 2XL, 3XL
or

Men's Total Wellness Team Windbreak color **black** or **navy**. Size S, M, L, XL, 2XL, 3XL

Return to Tiffany Kari or Julie Geissler at Duluth's City Hall Bldg Room 332

(Human Resources Use Only)

Participant received materials (guide & tracking card)



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Please Circle Preferred Total Wellness Team Member Jacket, Size, & Color Below

Ladie's Total Wellness Team Windbreak Jacket color **black** or **red**. Size XS, S, M, L, XL, 2XL, 3XL
or

Men's Total Wellness Team Windbreak color **black** or **blue**. Size S, M, L, XL, 2XL, 3XL

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