

Boost heart rates and bottom lines

Sign your business up for the Leduc Recreation Centre's 20/20 Corporate Wellness Program and your employees will receive 40% off the cost of an annual membership to the Leduc Recreation Centre.

A healthy and active employee means your business will see an increase in morale and productivity, as well as improved employee retention and reduced absenteeism.

Plus, your business will stand out amongst the competition as your employees enjoy a unique perk not offered in other recruitments.

How the 20/20 Corporate Wellness Program works

When you sign up for the 20/20 Corporate Wellness Program, the City of Leduc covers 20% of the cost of your employees' annual membership, and your business commits to pay for a minimum of 20% of the cost too.

*You can always contribute more,
it's all about investing in your employees.*

Employees of qualifying organizations can purchase their membership at any time throughout the year. This will enable your new employees to participate immediately.

When the employee wishes to register for the program, or when it's time to renew their membership, they simply identify themselves with proof of employment which can be a current pay stub or company ID.

Get started now by completing these simple steps

1. Assign a representative from your organization to complete, sign and return the 20/20 Corporate Wellness Program Discount Agreement form to the LRC.
2. Once registered, let your employees know about this great offer and encourage them to stop by the LRC to purchase their membership in person. The City's 20% contribution will automatically be applied and the employee will be responsible for paying the remainder of the membership.
3. The employee will then submit their membership receipt to your organization to be reimbursed for your company's matching 20% contribution.

Memberships purchased through this program are non-transferable, non-refundable and cannot be combined with any other offers or memberships plans. The program applies to annual membership purchases only.

2024 Rates		--- 20/20 Discount ---			
Annual Pass		Full Cost	LRC Pays	Employee Pays	Employer Reimburses
Adult	18 – 59 years	\$ 571.25	\$ 114.25	\$ 342.75	\$114.25
Senior	60 – 79 years	\$ 381.25	\$ 76.25	\$ 228.75	\$76.25
Youth	8 – 17 years	\$ 381.25	\$ 76.25	\$ 228.75	\$76.25

The Leduc Recreation Centre's 20/20 Corporate Wellness Program excludes all registered programs. However as a LRC member your employees will enjoy all of the benefits of membership, including access to unlimited drop-in opportunities at no additional charge. Visit www.leduc.ca/LRC/admission-membership for details.



20/20 Corporate Wellness Program Discount Agreement

City of Leduc

4330 Black Gold Drive Leduc, AB T9E 3C3

780-980-7120 www.leduc.ca/LRC

Organization _____

Primary Contact _____

Email _____

Mailing Address _____

Postal Code _____ **Business or GST #** _____

Phone Number _____ **Fax #** _____

By completing this form:

- ✓ Our organization has approved our employees' participation in the 20/20 Corporate Wellness Program.
- ✓ Our organization agrees to reimburse our employees a minimum 20% of their annual membership purchase.
- ✓ The LRC agrees to provide your employees with a 20% discount on their annual membership purchase.
- ✓ Our organization has identified the individual listed above as the authorized designate, who will be the primary contact for the City of Leduc should there be any questions regarding our employees and their participation in the 20/20 Corporate Wellness Program.
- ✓ Our organization understands that the Corporate Membership Discount Agreement cannot be combined with any other promotion or membership deal. Fees are applied on annual memberships only.
- ✓ Our organization agrees to provide thirty (30) days notice for cancellation of this contract.
- ✓ Our organization understands that the LRC will require one of the following forms of identification from our employees;
 - Company ID
 - Current Pay Stub
 - Copy of signed authorization letter
 - ✗ Business cards will not be accepted as proof of employment

Company Designate Authorized Signature _____

Name (Please Print) _____

Date _____

Please return this form to either Guest Services desk at the Leduc Recreation Centre, to the attention of the Customer Service & Membership Coordinator.