

Visit Submission Form

Part A: Member Information

Last Name _____ First Name _____ M.I. _____

Health Plan Name _____ ID # _____

Date of Birth (mm/dd) _____

Street Address _____

City _____ County _____

State _____ Zip Code _____ - _____

Phone Number _____ Email (optional) _____

Part B: Proof of Visits

Please complete one form per fitness center you use. You need to work out at least 10 times per calendar month at a qualified fitness center to receive your reward.

Submit a printout from your fitness center or submit this log for visit dates (mm/dd/yy) for the requested benefit period. Each of the requested visit dates must be initialed or stamped by the fitness center to be considered valid.

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
11.	12.	13.	14.	15.	16.	17.	18.	19.	20.
21.	22.	23.	24.	25.	26.	27.	28.	29.	30.

Fitness center information must be legible and complete for your reward to be processed.

Fitness Center Name _____

Fitness Center Street Address _____

City _____ County _____

State _____ Zip Code _____ - _____

Fitness Center Phone Number _____

Failure to submit this form completed with all required information may result in your form being returned to you.

I certify the information above is correct. I also understand it is a crime to knowingly submit false information or requests to obtain compensation and that any such actions may result in termination from the ExerciseRewards® program.

Fitness Center Staff Signature: _____
 Signed Printed Date

Member Signature: _____
 Signed Printed Date

Mail this completed form to:
ExerciseRewards
P.O. Box 509117
San Diego, CA 92150-9117
or send by email to fitness@exerciserewards.com

All forms are available at www.ExerciseRewards.com or by calling **1.877.810.2746**.

Once your 10th visit in a month is processed, you will receive a redemption email advising you to log in to www.ExerciseRewards.com. Go to the Rewards page and click "Available to redeem" and select your incentive period. Your check will be mailed to the address we have on file within 14 days after you redeem.

Remember:

- Qualifying fitness centers must offer regular cardiovascular, flexibility, and/or resistance training exercise programs; must offer a membership agreement; and must have staff oversight. Fitness centers outside of the U.S. do not qualify. Refer to ExerciseRewards.com for exclusions and limitations.
- Only one exercise session may be logged per calendar day. There must be at least 8 hours between sessions.

Your Visit Submission Form must be received **no later than 90 days** following the end of each reward period. Your group's benefit plan year is determined by your group's effective and renewal dates. For questions regarding your group's benefit plan year, contact ExerciseRewards customer service at **1.877.810.2746**.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all members. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact us at 1.877.810.2746 Monday through Friday, 5 a.m. to 6 p.m. Pacific time, and we will explain how you can work with your physician to find an alternative wellness program with the same reward that is right for you in light of your health status.