



## 2017 Fall Walking Program Enrollment and Release

I acknowledge that I reviewed and signed off on the online release and that I, individually, expressly and specifically assume any and all risk of injury, illness or death resulting from participation in the Walking Program. I understand that I should consult a physician before enrolling myself. Once I sign, I understand the risks involved and accept all of these risks.

I agree to comply with the program guidelines and rules as outlined and I understand that the guidelines are subject to modification. I acknowledge that the steps recorded will be from my own physical activity.

If eligible, I agree to use any rewarded personal leave per the program guidelines. If my employment terminates prior to the awarding of the personal leave, I understand I will forfeit the leave. I acknowledge I will follow the current personal leave policies.

I understand that I am responsible for the full cost of the program even if I choose not to complete the program or terminate my employment. I understand that the College will withhold any unpaid amount out of my last paycheck. Having read, understood, and agreed with these terms, I acknowledge my participation in the program.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Payment Options

#### **New or Returning Participant – Total Cost \$27**

- Cash
- Check – make payable to East Central College
- Payroll Deduction - \$4.50 per period over 6 pay periods running September 15, 2017 – December 8, 2017. (No payroll deduction on September 29<sup>th</sup>)

\*If you do not own a tracking device, you can purchase a tracking device at a discount through CHC 'Purchase Your Fitness Tracker' tab.

**Please return completed form to Human Resources by August 31, 2017**