

WIC Worksite Wellness Program Commitment Form

I, _____, on behalf of

_____ Local Agency, recognize the value of converting my Local Agency and its offices into Wellness Worksites. The Agency will follow the guidelines and criteria to develop a culture where wellness is the norm.

The Agency will actively support our employees in activities that will foster and maintain our all-around health and create a well-being environment. We promise to use imagination to propose healthful activities, solicit ideas from our staff, and encourage a dialogue that will promote well-being among us.

I further promise to create and work toward my own set of wellness goals and to support my fellow-employees as they work toward theirs.

Signed: _____ Date: _____

Name: _____

Address: _____

Telephone: _____

Email: _____

FAX: _____

- Check here if you would like to join the leadership of Agency's WIC Wellness team and/or request more information.

Please keep a copy for your records!

Mail or FAX to
California WIC Association
Attention WIC Worksite Wellness
1107 Ninth Street, Suite 625
Sacramento, CA 95814
FAX: 916-448-7826

