

STEP 3: GET FIT 2012 [Fitness Center Completion Form]

Consult your physician prior to starting an exercise program.



MEETING THE 2012 FITNESS REQUIREMENT OF WELLAWARE

You can meet the fitness requirement through participating in a wide variety of activities that include cardiovascular, strength training, stretching and recreational activities. The goal is to promote the health benefits of a well rounded and consistent exercise regiment. To satisfy the 2012 fitness requirement, **YOU ARE EXPECTED TO EXERCISE A MINIMUM OF 5 DAYS A WEEK FOR 12 CONSECUTIVE WEEKS.** A minimum of 30 minutes per exercise session, 3 days a week should be devoted to sustained cardiovascular exercise that elevates your heart rate so you obtain the most benefit. The remaining 2 days each week can be spent on additional cardiovascular activity, strength training, stretching and/or participating in other recreational activities such as golf, gardening, etc.

DIRECTIONS: Use this form to document that you have met the Step 3: Get Fit requirement by attending a fitness center or participating in group exercise classes in 2012. Write your name and employee ID# below and check off either the employee or spouse box then answer the following questions. Submit this form no later than October 31, 2012. Get the most out of your exercise by first reviewing the tips on the reverse side.

Name: _____ Employee ID#: _____ Employee Spouse
(located on front of employee badge)

1. What fitness center or facility do you attend?

_____ Name of facility _____ City and state

2. The WellAware requirement is, at minimum, to complete 30 minutes of cardiovascular (walking, jogging, cycling, stepping, swimming, elliptical, cardio kickboxing, etc.) exercise, three days per week for 12 consecutive weeks in 2012, with two additional days of other activity such as strengthening, stretching, recreation or more cardio. Provide information about your exercise habits over the past 12 weeks.

- Types(s) of cardio exercise you participate in: _____
- Number of days each week you participate in cardio exercise: _____
- Duration, in minutes, of your cardio workouts: _____
- Strength training—Number of days each week and brief description: _____

- Stretching—Number of days each week and brief description: _____

- Recreational Activities— Number of days each week and brief description: _____

3. This section is to be completed by a staff member at your fitness center or the instructor of your group exercise class(es).
I verify that _____ has exercised in our facility or participated in group exercise classes consisting of at least 30 minutes of cardiovascular exercise, 3 days/week and has completed two additional days of other activity for 12 consecutive weeks in 2012.

Staff Member's Name: _____ Date: _____

Staff Member's Signature: _____

4. My signature verifies that I've met the Step 3: Fitness requirement and participated in the activities described.

_____ Your signature required _____ Date

Return form to: WellAware, Berlin-BMN2 (interoffice) or Northeast Utilities, WellAware, 107 Selden St., Berlin, CT 06037 (U.S. mail).

Keep a copy of this form should you need to provide another copy to WellAware.