

# Weight Watchers Monthly Pass Program

## Verification Form

# WELLPOINTS



The City of Dallas is committed to providing you with an opportunity to earn WellPoints. In order to verify eligible employee's participation and completion of approved Wellness events, please provide the City of Dallas HR Benefits staff with this completed form. Please print this form and bring to your Weight Watchers Leader to verify attendance of the 12 weekly meetings attended.

### 1. Check the applicable Weight Watchers Service and complete details listed. (Internal Use Only)

Monthly Pass

Benefits Service Center Representative: \_\_\_\_\_ Date: \_\_\_\_\_

### 2. Attach Proof of Participation.

**At Work or Community Meetings:** Check the appropriate box below. Note that you must stay for the meetings to receive the credit. Ask your Weight Watchers leader or receptionist to certify and sign below.

I certify that \_\_\_\_\_ has attended  12 meetings

\_\_\_\_\_  
Weight Watchers Leader/Receptionist Signature

\_\_\_\_\_  
Meeting Name/Location

\_\_\_\_\_  
Date

### 3. Employee Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Employee ID \_\_\_\_\_  
(required for processing)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

