



Wellness Reimbursement Form

Incentive Offer# **O215-04**

Discover is providing a 100% reimbursement to employees only for Digital + Workshops program plans and a partial reimbursement for 1-1 Coaching. We take your health and wellness seriously. That's why WW has unlimited options to attend WW Workshops (either in-person or virtually). **To coincide with the option to attend live Virtual Workshops, Discover adjusted the process and qualifications to receive your reimbursement. Rather than having a WW Coach or Guide sign-off that you attended 10 out of 12 workshops in a 3-month period, you'll track online for 10 out of 12 weeks.**

Complete this form and follow the instructions below to receive reimbursement.

Your Name:	Employee Member ID:	Purchase Date:
<input type="checkbox"/> Employee		
Member Address: <i>Address where the reimbursement check is to be mailed</i>		
City:	State:	Zip:
Email address:		Phone:

1. WW Member, fill out the following required information

2. Check the box below indicating you met the participation criteria for your Digital + Workshop plan and indicate the reimbursement amount. *To receive reimbursement, you must meet the criteria below.*

<input type="checkbox"/> Digital + Workshops: Track 10 weeks in a 12-week / 3-month period	Reimbursement Amount: _____
<input type="checkbox"/> 1-on-1 Coaching + Digital: Track 10 weeks in a 12-week / 3-month period \$19.11/month	Reimbursement Amount: _____ (max)

3. Submit a copy of your Weight Tracker as proof of participation.

Log in to your account at www.weightwatchers.com and click on "Weight" (the scale icon) to access your weight tracker. Please note: you can black out your weight by hand if you prefer to not include the measurement on the form.

4. Submit proof of purchase with this form. Log in to your account at www.weightwatchers.com and print a copy of your billing history by following this path: **Account Settings => Account Status => Print Billing History.**

Other payment options (for franchise locations): credit card or bank statement, check stub, or WW receipt.

5. Submit completed form and associated documentation

Email: WWRebates@callTSC.com

By providing the information above and submitting this wellness incentive form, you acknowledge and agree to the following Terms and Conditions: Request form must be fully completed. *Keep copies of all material submitted. WW is not responsible for lost, late or misdirected mail. Wellness incentive checks are ordinarily processed within 30 days of receipt. All rights to any earned wellness incentives are voided upon your separation from employment. Void where prohibited or restricted by law. Availability and terms of reimbursement may change without notice. To track reimbursement log onto: www.checkyourrebate.com/Discover*