# 2025 INCENTIVE REWARDS ORDER FORM

WELLNESS WORKS

**Quarter** ☐1st ☐2nd ☐3rd ☐4th

Today's Date:

| |
|---|
| **Coordinator Name:** |
| **Wellness Group:** |
| **Shipping Address:** |
| **Email Address:** |

| Points Earned | Quantity | Incentive Awards & Activity Logs |
|---|---|---|
| | | |
| 150 | | 9-Inch Cooking Tongs |
| | | Insulated Zipper Tote Bag |
| | | Silverware Set |
| | XXXX | 1 Bumper Crop Voucher ($5 each) ➡ |
| 300 | | 20 oz. Stainless Steel Insulated Tumbler |
| | | Silicone Oven Mitt |
| | | Muscle Massage Roller Stick |
| | XXXX | 2 Bumper Crop Vouchers ($5 each) ➡ |
| 450 | | 10-Pack Shopping Bags |
| | | Stretch Out Strap with Exercise Book |
| | | RTIC Lunch Container |
| | XXXX | 3 Bumper Crop Vouchers ($5 each) ➡ |
| 600 | | Cargo Box |
| | | Backpack Cooler |
| | XXXX | Long Sleeve Hoodie |
| | XXXX | |
| | XXXX | |
| | XXXX | 4 Bumper Crop Vouchers ($5 each) ➡ |
| | | Participant Handbooks with Log Cards |

| Small | Medium | Large | XL | XXL |
|---|---|---|---|---|
| | | | | |

**For those ordering Bumper Crop Vouchers, please enter the name(s) of the recipients and how many vouchers for each below:**

| Name | # of vouchers |
|---|---|
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| (more spaces next page) | |

**Place your order by mailing this form to:**
Health Promotions Assistant
Wellness Works – MMEHT
60 Community Drive
Augusta, ME 04330

**OR by:**

**Fax:** 624-0126
**Email:** Wellness_Department@memun.org

***Wellness Works*** **is the Health Education and Promotion Program of the Maine Municipal Employees Health Trust**

## 2025 Incentive Rewards Order Form (Continued)

For those ordering Bumper Crop Vouchers **(and needed more spaces),** please enter the name(s) of the recipients and how many vouchers for each below:

| Name | # of vouchers |
|---|---|
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| Name | # of vouchers |
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