

## GYM MEMBERSHIP REIMBURSEMENT CLAIM FORM

**You will qualify to be reimbursed up to \$25 per month for your gym membership fee.**

1. Attach a receipt that shows you paid for the fitness center membership for the time frame you're requesting reimbursement.
2. Attach proof that you utilized the facility during the time frame you're requesting reimbursement (most gyms have a computer print out of utilization).

\*Gym Membership Reimbursement only available for active SJC EMPLOYEES  
Temporary/seasonal/PRN are NOT eligible.

GROUP# \_\_\_\_\_

MEMBER ID# \_\_\_\_\_

EMPLOYEE NAME \_\_\_\_\_

GYM NAME \_\_\_\_\_

TIME FRAME \_\_\_\_\_

Employee: \_\_\_\_\_

Copy of proof of payment attached, check here

Copy of proof of participation from gym attached,  check here

\*Reminder proof of payment and proof of participation are required  for reimbursement.

Claim will be denied if not provided.

SJC EMPLOYEE SIGNATURE \_\_\_\_\_

GROUP APPROVAL, CHECK HERE

AMOUNT TO BE PAID TO THE MEMBER \_\_\_\_\_

GROUP AUTHORIZED REP SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Submit completed claim forms to [HR@sjcindiana.com](mailto:HR@sjcindiana.com) with the subject Gym Reimbursement. Claims forms must be submitted by last day of employment to be eligible for reimbursement. Please Note: It takes 6-8 weeks to process/receive checks.

Questions? Contact [HR@sjcindiana.com](mailto:HR@sjcindiana.com)