

Religious Exemption Waiver Form (2025 Wellness Program)

Form must be received on or before your wellness activity deadline date.

You are eligible to maintain a wellness credit for participating in all 2025 Wellness Activities as part of the company's wellness program.

If you are unable to participate in the wellness activities due to a sincerely held religious belief, please complete this affidavit. This form must be renewed annually.

Please review this waiver carefully, attest to the appropriate information and then sign and date the form at the bottom.

The information provided on this form will be kept confidential and will not be used for any purpose other than to determine if you are eligible for a waiver of the 2025 Wellness Activities.

Please complete the section below:

My sincerely held religious beliefs prevent me from participating in the 2025 Wellness Activities. These religious beliefs are as follows:

Participant First Name (Print) **(Required)** _____ Last Name **(Required)** _____

Participant Date of Birth (MM/DD/YY) _____

Phone Number _____

Participant Signature _____ Date _____

Please ensure all fields above are completed and retain a copy of this form for your records.

Submission instructions:

Fax a copy of this form to: **401.633.7546** or mail a copy to the following address:

**Virgin Pulse
75 Fountain Street
Providence, RI 02902**

If you have questions about the waiver process, please contact Virgin Pulse Member Services at boa.support@virginpulse.com or by calling 833.525.5788. Representatives are available Monday through Friday from 8am to 9pm ET.