

EXERCISE_{RX}



The Value of Exercise Prescription

See Your Provider for a 60-Day Guest Membership to Synergy Health Club*

At Providence St. Joseph Health, we care about helping our patients live well. To not only heal, but to also thrive. Through our Synergy Health Club locations in Napa and Petaluma, we're now able to extend the care and support you receive, with Exercise Rx.

Through Exercise Rx, eligible patients benefit from a customized 60-day fitness program, complete with full access to Synergy Health Club. Save 85% off standard membership pricing with absolutely no strings attached; the decision to continue a membership after your paid trial is entirely up to you.

VALUE OF EXERCISE RX

\$60 / 60 Day
Membership
-\$800 Value!-

Added benefits:

- Tailored exercise program based on provider-guidelines
- Health Assessments & Evaluations
- Nutrition Consultation with Registered Dietitian
- Bi-weekly Check-ins
- Two personal training sessions and unlimited studio classes
- 60-days of full access to luxurious health club amenities

Let's take this next step in health and wellness together. See your provider for an exercise prescription, valid for qualifying patients. Then contact your Synergy Health Club location of choice to get started!

*Exercise RX program is valid for local, adult guests, 18 years or older. Excludes current and former members. Exercise RX membership valid for up to 60 consecutive days for one adult individual. Provider referral required. Certain conditions and restrictions apply.

Synergy Health Club Napa

3421 Villa Lane, Napa, CA 94558
707.251.1395 | www.SynergyHealthClub.org

Synergy Health Club Petaluma

1201 Redwood Way, Petaluma, CA 94954
707.766.8080 | www.SynergyHealthClub.org



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See your provider for an exercise prescription valid for qualifying patients, and then contact Synergy Health Club to schedule a complimentary tour and get started.*

Provider, please fax completed form to patient's Synergy Health Club location.

REFERRAL FOR EXERCISE PRESCRIPTION

Patient: _____ Patient DOB: ____ / ____ / ____ Patient Phone #: _____

Provider: _____ Provider Signature: _____

Cost: *\$60* _____ Today's Date: _____



60-Day Complimentary Exercise Program for Provider Referred Patients:

- Nutrition Consult
- Personal Training Sessions
- Tailored exercise prescription
- Bi-weekly fitness coaching check-ins
- Unlimited studio classes & workouts
- 60-days full club access

Fax completed form to patient's Synergy Health Club location

NAPA

3421 Villa Lane, Napa, CA 94558
Fax: 707.251.1373

PETALUMA

1201 Redwood Way, Petaluma, CA 94954
Fax: 707.789.7028



www.SynergyHealthClub.org

Please call the Fitness Manager at the indicated Synergy location to schedule your initial appointment.