



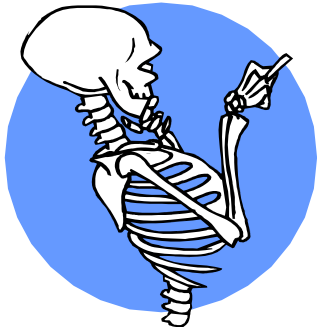
HEALTH FAIR FOR COUNTY EMPLOYEES

FREE Health Screenings!

Thursday, November 4, 2010

6:00 a.m.— 10:00 a.m.

Lab available: 6—9:00 a.m.



**Heights Apts. At Hillside Country Living
09876 CR 16, Bryan, Ohio**

- ♥ Comprehensive Blood Panel (requires 12 hour fasting— May drink water & take medications)
- ♥ Blood Pressure
- ♥ Height/Weight & Nutrition Information
- ♥ Derma Scan (checks facial sun exposure)
- ♥ PSA Test (men only \$20 at time of registration)
- ♥ Hemoglobin A1C (diabetic screen \$10 at time of registration)
- ♥ American Red Cross
- ♥ Fitness Assessment
- ♥ American Cancer Society—Various Cancer Information (Breast Self-Exam, Prostate, Skin)
- ♥ Insurance Company Representatives
- ♥ Vision, Glaucoma
- ♥ Hearing Screen
- ♥ Massotherapy

♥ Spouses Invited to Participate! (\$25 due at registration for blood work. *PSA and Hemoglobin A1C tests are extra for all participants*)

♥ Continental Breakfast Provided for Participants!

Many Health Education Displays
Health Experts available to answer your questions
Door Prizes & Promotional Incentives

SPONSORED BY:

Williams County Employee Health & Safety Committee

Williams County Commissioners

Community Hospitals and Wellness Centers

Williams County Health Department

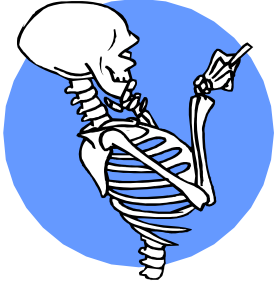
Williams County E.M.S.

No appointment necessary— must be 18 years and older

***YOU MUST REGISTER BY WEDNESDAY, OCTOBER 27 TO
PARTICIPATE
NO EXCEPTIONS!***



HEALTH FAIR FOR COUNTY EMPLOYEES



Register Now!

FREE Health Screenings!

Thursday, November 4, 2010
6:00 a.m.— 10:00 a.m.
Lab available: 6—9:00 a.m.

Heights Apts. At Hillside Country Living

****12 Hour Fast Required for Blood Work ****
(May drink water and take medications!)
Free Continental Breakfast Provided for Participants

****EACH participant please provide self-addressed stamped long (#10) envelope for lab results****

Participants must complete individual registration form

Complete & Return this Portion. . . Complete & Return this Portion. . . Complete & Return this Portion. . . Complete & Return this Portion. . . Complete & Return this Portion. . . Complete & Return this Portion. . . Complete & Return this Portion. . .

Employee Participant:(Please Print) _____ Date of Birth _____

Department: _____

Spouse Participant:(Please Print) _____ Date of Birth _____

_____ **No**, I do not care to participate in the County Employee Health Fair

_____ **Yes**, I wish to participate in the County Employee Health Fair

Comprehensive Blood Test Screen: **Yes** **No** (\$25 due at registration for participating spouse)

PSA Test: **Yes** **No** (\$20 due at registration—for men only)

Hemoglobin A1C: **Yes** **No** (\$10 due at registration for anyone wishing test done)

Return Completed Portion to Agency Payroll Dept.

Make checks payable to Williams County Commissioners
Registration & Money Due By Wednesday, October 27, 2010