



Share Your Wellness Success Story

If you desire to share your wellness success story, please fill out the below form and email the completed form to employeeewellness@harrishealth.org.

First & Last Name			
Employee ID If you are a spouse or dependent, please enter the employee ID number of the employee with whom you are associated.		Relationship (please select ONE)	
		Employee	Spouse
		Dependent	
Date			
Department			
Location			
Phone Number			
Photo If you would like to include a photo, please attach the photo file when you submit your form. Enter a brief description of your photo here.			
My Story Tell us how you make healthy living possible or tell us how you THRIVE! We want to know what's working for you.			
Terms and Conditions of Agreement			
<p>If I check this box, I understand that the content (including a photo) I submit will be used solely by the Harris County Hospital District DBA Harris Health System (Harris Health System) in internal publications to publicize and promote employee health. Harris Health System may edit my story and photo. I understand that I have no right to inspect or approve the finished product and that Harris Health System is not obligated to use my story or photo. I waive all rights and claims against Harris Health System</p>			
<p>If I check this box, I understand that the content (including a photo) I submit will be used the Harris County Hospital District DBA Harris Health System (Harris Health System) in internal and external publications to publicize and promote employee health. Harris Health System may edit my story and photo. I understand that I have no right to inspect or approve the finished product and that Harris Health System is not obligated to use my story or photo. In addition, I acknowledge that Harris Health may use, reuse, edit, publish, and create and copyright derivative works of its publication in any and all media. I waive all rights and claims against Harris Health System or its affiliates related to this Agreement, such as use or publication of the story or photo.</p>			
Agree to Terms Please check ONE.	Agree - Harris Health has permission to share my story in internal publications, and I agree to the terms and conditions.		Disagree – Please do not distribute my story.

Contact us at employeeewellness@harrishealth.org; 713-566-6686

Harris Health is committed to helping you achieve your best health. Incentives for participating in a wellness program are available to all eligible employees. If you think you might be unable to meet a standard for a incentives under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact Employee Wellness at 713.566.6686 or via email at employeeewellness@harrishealth.org and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.