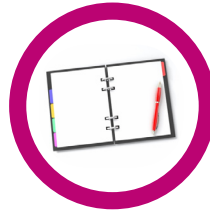
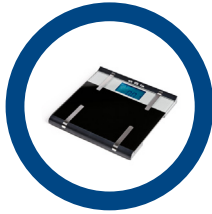


ChooseToLose@Work

My Pledge

This is a mutual agreement between you and your ChooseToLose@Work facilitator. It aims to formalise your commitment to your workplace weight management programme.



I _____ agree to attend the ChooseToLose@Work programme at _____. I understand that this programme is designed to support me to lose weight safely - and keep it off!

I understand that this involves:

- Attending the weekly weigh-in sessions facilitated by ChooseToLose@Work facilitator.
- Attempting to use the resources and apps supplied and start to self monitor my progress eg keeping food and activity diaries, setting small achievable goals.
- Some of my clinical information may be used anonymously in evaluating the ChooseToLose@Work outcomes.

I understand:

- all consultations are confidential.
- it is my responsibility to follow the programme and it is my commitment that will result in success.

Date: _____