

**Bureau of Land Management
Fitness Membership Fee Reimbursement Program
Self-Certification of Usage**

I certify that I have engaged in fitness activities at the center for which I am seeking membership fee reimbursement on an average of 2 times per week for at least a half hour per visit for the period for which I am seeking reimbursement.

I understand that my failure to engage in fitness activities at my center at least 2 times per week for at least a half hour per visit for the reimbursement period disqualifies me from receiving reimbursement for my membership fees.

I also understand that falsely certifying usage will lead to my immediate removal from participation in the BLM's Fitness Membership Fee Reimbursement Program, without reimbursement for any expenses already incurred, and could result in appropriate disciplinary action.

Fitness Center: _____

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____