



**clergy care**  
Wellness Program

## 2008 Health Risk Assessment Component Completion Card

Clergy Name

Church Appointment

Address

Email

City/ST/Zip

Phone ( )

Date of HRA

Signature

MAIL TO: United Methodist Church Southwest Texas Conference / 16400 Huebner Rd - San Antonio, TX 78248



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## 2008 Lab Screening Component Completion Card

Clergy Name

Church Appointment

Address

Email

Phone ( )

Date of Test

Lab Location

Signature

MAIL TO: United Methodist Church Southwest Texas Conference / 16400 Huebner Rd - San Antonio, TX 78248



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## 2008 Wellness Conversation Component Completion Card

Clergy Name

Church Appointment

Address

Email

Phone ( )

Name of Provider

Date of "Conversation"

Signature

MAIL TO: United Methodist Church Southwest Texas Conference / 16400 Huebner Rd - San Antonio, TX 78248



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Wellness Program

## 2008 Physical Exam Component Completion Card

Clergy Name

Church Appointment

Address

Email

Phone ( )

Name of Provider

Date of Physical

Signature

MAIL TO: United Methodist Church Southwest Texas Conference / 16400 Huebner Rd - San Antonio, TX 78248



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## 2008 Lab Screening - Personal Expense Voucher

(Not valid for the Annual Conference Lab Screening.)

Date: \_\_\_\_\_ Name (print) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Travel: # of Miles \_\_\_\_\_ @ \$.20 per mile \_\_\_\_\_

Meals: Breakfast \$3.00 \_\_\_\_\_ Lunch \$3.50 \_\_\_\_\_ Dinner \$3.50 \_\_\_\_\_

Signature \_\_\_\_\_

Mail to: United Methodist Church Southwest Texas Conference  
16400 Huebner Rd - San Antonio, TX 78248

Please provide receipts  
for meals



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## 2008 Wellness Conversation - Personal Expense Voucher

Date: \_\_\_\_\_ Name (print) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Travel: # of Miles \_\_\_\_\_ @ \$.20 per mile \_\_\_\_\_

Meals: Breakfast \$3.00 \_\_\_\_\_ Lunch \$3.50 \_\_\_\_\_ Dinner \$3.50 \_\_\_\_\_

Signature \_\_\_\_\_

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Please provide receipts  
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## 2008 Physical Exam - Personal Expense Voucher

Date: \_\_\_\_\_ Name (print) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Travel: # of Miles \_\_\_\_\_ @ \$.20 per mile \_\_\_\_\_

Meals: Breakfast \$3.00 \_\_\_\_\_ Lunch \$3.50 \_\_\_\_\_ Dinner \$3.50 \_\_\_\_\_

Signature \_\_\_\_\_

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