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**Momenta Wellness Network members**

* **Partner criteria**
  + Professionals, institutions or organisations responsible for health promotion
  + Professionals, institutions or organisations promoting wellness
  + Individuals, institutions or organisations interested in and motivated by wellness
  + Sectoral or multi-sectoral organisations that can contribute to wellness initiatives
  + Those who have signed the membership / agreement form
* **Partner advantages**
  + One seat, one vote system at the annual general meeting
  + Partners can sit on one of the subcommittees
  + Partners have access to the information sharing network (in both directions) and communication tools
  + Partners can bring priorities to the agenda of the network

**STATEMENT OF COMMITMENT FOR THE PARTNERS OF THE MOMENTA WELLNESS NETWORK**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby commit to the vision, the mission, and the principles guideline set out in this statement and I’m ready to promote this ideology of healthy living, wellness, and active participation to our partners, our clients, our employees, and our residents.

Guided by the strength of the **group’s diverse composition**, Momenta will contribute to the overall wellness of South-East New Brunswick’s population by **gathering and sharing information** and best practices, **lead the creation of a wellness movement** and **influence policies** with the unified voice of the relevant stakeholders.

**The three pillars**

1. Knowledge
2. Action
3. Collective Impact

* The success of the initiative will be possible with the adoption of a collaborative approach involving the private and public sectors, as well as volunteers and community organisations.
* Use as a reference guide the elements included in New Brunswick’s Wellness Strategy to help identify your work in connection to the strategy. [http://www.wellnessnb.ca/wp-content/uploads/2015/11/New-Brunswick’s-Wellness-Strategy-Framework.pdf](http://www.wellnessnb.ca/wp-content/uploads/2015/11/New-Brunswick's-Wellness-Strategy-Framework.pdf)
* Incorporate inclusive principles in all initiatives set out in the action plan.

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the institution, organisation or if applying as an individual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Setting of interest**: Community \_\_\_ Home \_\_\_ School \_\_\_ Workplace \_\_\_

**Focus areas**:

* Healthy eating and food security \_\_\_
* Physical activity \_\_\_
* Tobacco Free Living \_\_\_
* Mental fitness and Resilience \_\_\_
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you interested in being a part of a Momenta Wellness Network subcommittee?**

Yes \_\_\_ No \_\_\_ **or be a volunteer at an activity** Yes \_\_\_ No \_\_\_

**Please add me to the distribution list of Momenta Wellness Network** Yes \_\_\_ No \_\_\_