



Take the Stairs – Every Step Counts! Business Commitment Form



Mayor Thomas M. Menino

Business Name: _____

Business Type (e.g. health practice, law office, college, retail store) _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

We commit to placing Take the Stairs signage at the following locations

Building Name	Building Address (if different from above)	Number of floors	Signage to be placed at (Check all that apply indicating the number of units)		
			Number of Elevators	Number of Escalators	Number of Building or Stairwell Entrances

(For additional buildings, please use an additional form.)

Proposed start date _____

Would you like technical assistance in implementing the campaign and placing the signs? Yes No

Operational Contact Name _____ Title _____

Phone (____) _____ - _____ Ext _____ Email _____

Materials Request	Quantity Requested (up to 50 units/sets)
Wall-mounted clear sign holders	
Take the Stairs signage (set of 10 assorted printed signs)	
Take the Stairs kit (contains CD with 24 printable signs, instructions, tips, and additional resources)	



I commit that the above-listed business / organization will participate in Boston's *Take the Stairs* campaign and authorize that our name be included in a list of participating businesses.

Name (please print): _____ Title _____

Phone (____) _____ - _____ Ext _____ Email _____

Signature _____ Date _____

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Please fax completed form to 617-534-5968

For more information please contact Mary Jane Williams at 617-534-5685