

# BiW4Teens Group Program License Application

## PART I – UNDERSTANDING CONDITIONS OF THE LICENSE

This *Back in Whack for Teens* Group Program License (“License”) will address the working and financial relationship between Positive Patterns for Life, LLC “PPL” and the organization applying for the license (“Applying Organization”) concerning the utilization of the *Back in Whack for Teens* (“BiW4Teens”) pediatric weight management program materials and resources. *BiW4Teens* program materials and resources are copyrighted under the author’s name Laurie Jean Ellis (“Ellis”). Ellis has given PPL authority to represent Ellis in this License agreement.

PPL gives written permission to the Applying Organization to download and reproduce *BiW4Teens* program materials and resources for the purpose of providing the program to youth who are provided services by the Applying Organization. Program materials and resources are only to be used by the Applying Organization. Under no circumstances are any parts of the program materials and resources to be sold for money or exchanged for other goods or services. Youth participating in a BiW4Teens Group program, sponsored by the Applying Organization, are not to be charged a fee for utilizing the online videos or the online PDF workbook. However, certain fees are allowable which may include: fee to pay for the health coach’s time, fee to reimburse cost of paper and printing of the PDF workbook, fee for other program materials (i.e. journal, bracelet, marker, pencil).

PPL authorizes the Applying Organization to unlimited use, as defined in the previous paragraphs, of the *BiW4Teens* program materials and resources for 12 calendar months for the fee \$395.00. This 12-month term will start on the day that the License fee is paid in full and will expire on the same day, one calendar year later. If the Applying Organization wants to continue using *BiW4Teens* program materials and resources past this expiration date, PPL will need to receive the full License fee prior to this expiration date.

If any part of the “Conditions of the License” are violated by the Applying Organization, the License will be promptly terminated with no refund given for the remaining months left on the License.

SIGNATURE OF UNDERSTANDING	
I, _____, the organization administrator/ manager of the <small>Print Name</small>	
Applying Organization, have read the “Conditions of the License” and do understand and agree to comply with these conditions.	
_____ <small>Signature of Manager/Administrator</small>	_____ <small>Date</small>

## PART II – PROGRAM MATERIALS AND RESOURCES

The License includes all of the following program materials and resources. These program materials and resources may be used by Applying Organization as defined in Part I of the License.

### A] Group Program Materials Included:

1. *BiW4Teens Group Program Implementation Checklist*
2. *BiW4Teens Group Facilitators Program Guide*
3. *BiW4Teens Program Curriculum*

4. Forms used during group session:
  - a. *Parent-Teen Program Commitment Contract*
  - b. *BiW4Teens Health Habit Assessment Form*
  - c. *BiW4Teens Individual Participant Progress Log*
  - d. *BiW4Teens Multi-Participant Log*
  - e. *Parent Support Pack + Resources for Working with the Doctor*
  - f. *BiW4Teens Wacky Words Key*
5. Program promotion materials:
  - a. *BiW4Teens Group Program Brochure*
  - b. *BiW4Teens Clinic Poster*
  - c. *BiW4Teens News Article Template*

**B] Participant Materials Included:**

1. Downloadable PDF version of the *BiW4Teens Workbook*
2. All 27 online *BiW4Teens* interactive health coaching videos

**C] Dedicated Private Webpage for Your Organization:**

1. Participant materials will be located on private your organizations private dedicated webpage.
2. Organization specific messaging included with this page.

**D] Participant Materials NOT Included:**

1. Three-ring binders
2. Copy paper and printing costs for the workbooks
3. Program incentive gifts – given when youth complete all 27 program sessions and hand in completed *Wacky Words Form*
4. Optional participant materials:
  - a. Pen or pencil
  - b. Highlighter
  - c. Journal
  - d. Bracelet
  - e. Measuring tape
  - f. Program completion gift – given when youth have followed the maintenance phase of the program for at least 4 months

**E] Staff Training Resources Included:**

1. Four-part staff orientation program via on-demand video presentations to include:
  - a. Overview of childhood obesity (health issues related to childhood obesity and key habits that impact a child's weight)
  - b. Overview of *BiW4Teens* program components and program outcomes
  - c. Detailed description of the behavioral change component of the program
  - d. Detailed description of other four program components (nutrition, physical activity, parent training, and lifestyle habits).
2. *BiW4Teens Habit Explanation Cue Card*
3. *BiW4Teens Program Outline*

**F] Certified Back in Whack Coach (CBIWC) Training for free!**

This training prepares health coaches to become CBIWC for the *BiW4Teens* Program. The CBIWC Training and Certification normally costs \$195.00 per health coach. However, this training and certification is FREE of charge for organizations who have purchased the *BiW4Teens* Group Program License. The CBIWC training typically takes 9 to 10 hours to complete. Health coaches

complete the CBIWC exam while they work through designated training materials and complete training tasks.

**G] Organizations receive ongoing program support from the Positive Patterns for Life company.**

### **PART III – ORGANIZATION INFORMATION**

Organizational Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Lead Health Coach: \_\_\_\_\_ Title: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Administrator/Manager: \_\_\_\_\_ Title: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### **PART IV – SUBMIT LICENCE APPLICATION AND PAYMENT**

You can submit your completed BiW4Teens Group Program License Application via email or mail, depending on which form of payment you decide to use.

Select Payment Method
<input type="checkbox"/> <b>Pay with Company Check, Money Order, or Cashier Check</b> Make checks/money orders payable to <b>Positive Patterns for Life, LLC</b> . Mail your completed BiW4Teens Group Program License Application and payment (company check, money order, or cashier check) to: <b>Positive Patterns for Life, LLC</b> <b>P.O. Box 902</b> <b>Guernsey, WY 82214</b>
<input type="checkbox"/> <b>Pay with Company Credit Card</b> Scan your completed BiW4Teens Group Program License Application into your computer, then email it to: <a href="mailto:positivepatternsforlife@gmail.com">positivepatternsforlife@gmail.com</a> . After <i>Positive Patterns for Life, LLC</i> receives your application, you will receive an email with a payment link, which enables you to pay for the program license with a credit card.

After *Positive Patterns for Life, LLC* receives your payment, you will receive an email containing two weblinks. One link to the webpage containing all of the program materials and resources listed under sections Part II – sections A, E, & F. The second link will be to your organization's dedicated private webpage, which will contain the BiW4Teens program videos and downloadable PDF workbook.

**If you have any questions about how to complete this application, please email [positivepatternsforlife@gmail.com](mailto:positivepatternsforlife@gmail.com) or call 307-331-4256.**