

TWELVE COUNTIES SOUTHWESTERN ILLINOIS DISTRICT COUNCIL LABORERS-EMPLOYERS COOPERATION AND EDUCATION TRUST

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HEALTH & SAFETY FAIR

Dear Local Union Member:

The Twelve Counties Southwestern Illinois District Council LECET in conjunction with the Laborers' Health & Safety Fund of North America invite you and your family to a Health & Safety Fair on Saturday, March 20, 2010 from 7:00 a.m. to 12:00 p.m. in the Conference Wing of the Gateway Center, One Gateway Drive, Collinsville, Illinois (map on reverse side). **DOORS WILL OPEN AT 7:00 A.M.**

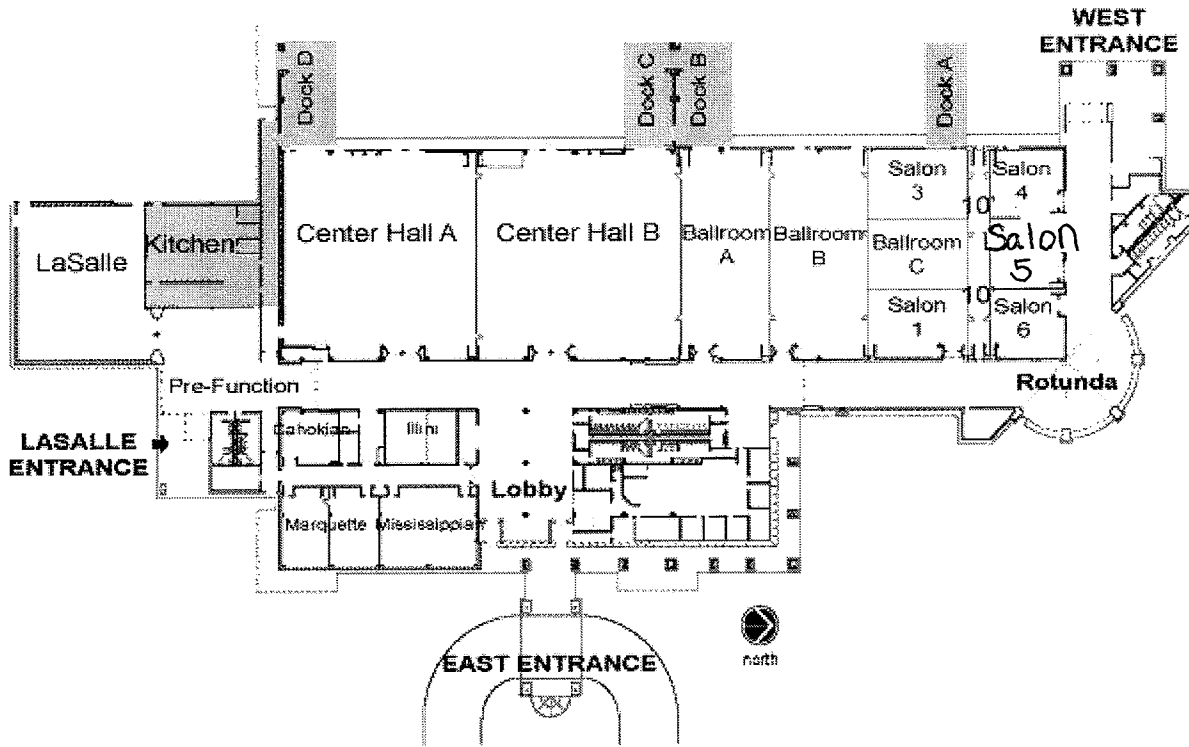
Various Free Screenings will be available to your family at this event! LECET has made arrangements with Gateway Regional Medical Center for the following optional blood tests to be available: **Wellness Profile Blood Test and a Prostate-Specific Antigen (PSA) Blood Test** which is available for men 40 years of age or older. **THE WELLNESS PROFILE BLOOD TEST AND THE PSA WILL BE FREE OF CHARGE.** Members and their spouses wanting to take advantage of these blood tests will need to pre-register by returning the enclosed postage paid response form by March 1, 2010 (PLEASE RETURN THE FORM EVEN IF YOU WILL NOT BE HAVING THE BLOOD TESTS. THE REGISTRATION FORM IS TO ASSIST IN MINIMIZING THE WAIT TIME ON THE DAY OF THE TESTING.

The Wellness Profile includes a lipid panel, iron and glucose test. **If you will be having the Wellness Profile done you will need to do the following: Must fast for at least 8 hours and no more than 10 hours; no food or drink, except water, clear tea, or black coffee; take all necessary medicines with a sip of water.** We will have food and beverages for you after your test. **It is very important that you return the response flyer in order to have the necessary staffing.**

Also available again in 2010 is the Carotid Artery Screening! This screening is available to you **free of charge!** **THE REGISTRATION FORM IS TO ASSIST IN MINIMIZING THE WAIT TIME ON THE DAY OF THE TESTING.** **It is very important that you return the response flyer in order to have the necessary staffing.**

Activities for children will include a supervised room with arts and crafts and a "bounce house", the Scottish Rite will be doing "Child Safety" program which includes fingerprints and photograph of your child at no charge, local State's Attorneys Offices in cooperation with their respective Sheriff's Departments will also be present. Various health related associations and consumer organizations (Central Laborers' Welfare & Pension Funds, Southern Illinois Members Assistance Program, NPA, Retirees Council, County Clerks) will be providing information and/or will have representatives in attendance to answer your questions. Food and beverages will be provided throughout the day. LIUNA Local Membership Card will be required for admittance. For more information contact your local union. You will also be able to find these forms on our website: www.swildc.com

Attendance Prizes every 15 minutes at various locations



Salon 5: Life Line Screening
 -Carotid Artery Screening

Salon 6: Wellness Profile/PSA
 Blood test (Gateway Regional
 Medical Center)

LaSalle: Various Vendors

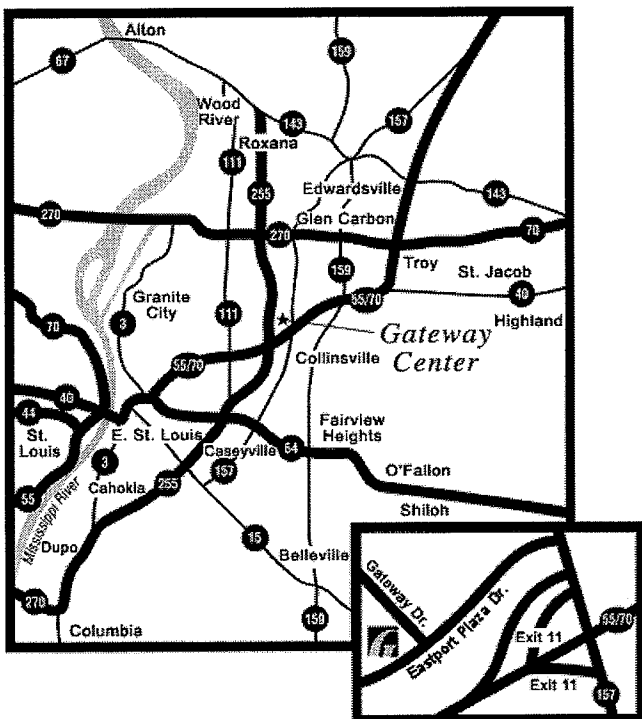
Pre-Function: Registration, Child Identification, food and beverages

Mississippian: American Red Cross-Blood Drive

Marquette: "Kid Center"-variety of children activities including a bounce house

Illini: Hearing and Vision screenings

Cahokian: Women and family health



REGISTER FOR YOUR FREE STROKE SCREENING

4 facts you need to know about stroke prevention:

- 80% of stroke victims had no apparent warning signs
- Ultrasound screenings can help you avoid a stroke
- Stroke is a leading cause of death and permanent disability
- Screenings are fast, painless, affordable and convenient

REGISTER NOW FOR YOUR FREE Stroke/Carotid Artery Screening

This screening is an ultrasound evaluation of the carotid arteries that screens for build-up of fatty plaque – the leading cause of stroke.

*Please detach and mail the slip below.
Information must be received by 9 a.m. on March 1, 2010.*

NAME: _____

ADDRESS: _____

PHONE: _____ ALTERNATIVE PHONE: _____

DATE OF BIRTH: _____

Please complete and return by March 1, 2010!

Members Name _____

Local Union # _____

- Yes, my family will attend the Health Fair
- No, my family will be unable to attend the Health Fair

_____ Number of people in my family that will attend

Below are Registration forms for Wellness Profile and PSA tests. Please fill out one form per person receiving tests. If additional space (forms) are required, please use a separate piece of paper and include all requested information. PLEASE RETURN ALL INFORMATION IN THE PRE-ADDRESSED POSTAGE PAID ENVELOPE EVEN IF YOU DO NOT PLAN ON ATTENDING. THANK YOU!

Wellness Registration form for Health Fair March 20, 2010

Last Name _____ First Name _____

Date of Birth _____ Social Security Last 4 digits _____

Home Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

I plan to participate in the following:

- Wellness Profile (fasting) PSA

Wellness Registration form for Health Fair March 20, 2010

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Date of Birth _____ Social Security Last 4 digits _____

Home Address _____

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