



DEFENSE HEALTH AGENCY

DILORENZO TRICARE HEALTH CLINIC
5801 ARMY PENTAGON
WASHINGTON, DC 20310-5801

MCHLP-FTW

Fit To Win/Wellness
Corridor 8, Room MG886A.4
DiLorenzo TRICARE Health clinic
Phone: 703-692-8898 Fax: 703-692-6201

Email: dha.pentagon.ncr-medical.mbx.dthc-nursing-mothers@mail.mil

Welcome to the Pentagon/Mark Center Nursing Mothers' Program (PMCNMP.) Fit To Win/Wellness and Washington Headquarters Services at the Pentagon are pleased to provide this service for you. In order to have a successful program, we must ask the cooperation and assistance of all mothers using the room. After signing this agreement please return to Fit To Win by email, fax or in person.

By signing this agreement you agree to:

1. Provide your own personal pumping accessory kit and never share personal accessories.
2. Provide your own storage bottles/labels and storage bag.
3. **Sign in each time, each day, you use the room.** (For example, if you use the room 3x/day, you will sign-in 3x/day.)
4. Assist with maintaining cleanliness of the room.
5. Not allow friends or coworkers to accompany you inside the room without receiving prior permission. Never share the room combinations. Only Fit To Win has this authority.
6. Adhere to all program conditions as stated in the PMCNMP Program Expectations Guide

The Nursing Mothers' Program is a service which can be revoked at any time if the room or equipment is abused, neglected or if program rules are not observed. Thank you for your cooperation.

***Please note the room you intend to use:**

Pentagon: 2A5WA ____, 5A5WA ____, 2B9WA ____, 3B9WA ____, 3A7WA ____, 4A7WA ____, 4A1WA ____ (Pumps are not available in 4A1WA, please bring your own.)

Mark Center: 01N24-03 ____, 01E27 ____

Date you will begin using the room: _____

How did you hear about the Nursing Mothers' Program? _____

I have read the program description and responsibilities. I agree to comply with the stated terms of the program.

Nursing Mother's Signature

Printed Name

Duty Email address

Duty Phone Number

Date

Active duty ____ Civilian ____