

**WIC AGREEMENT—Hill City**

**THIS AGREEMENT** is made and entered into the 1st day of October, 2016 by and between Aitkin County Health and Human Services for the Aitkin County WIC Program, hereinafter referred to as the “Agency” and the Hill City Assembly of God Church, Hill City, hereinafter referred to as the “Hill City Assembly of God Church”.

**IN CONSIDERATION** of the mutual promises, agreements, and understanding hereinafter set forth, it is agreed as follows:

1. The Hill City Assembly of God Church will provide space within their premises for the Agency to administer the Aitkin County WIC Program for eligible Women, Infants, and Children through WIC Clinics at a rate of \$45.00 per quarter for the use of the facility. (Quarterly payments due October, January, April and July.)
2. The Agency will hold the Clinic at the contracted location once a month.
3. The time and dates of the WIC Clinic will be:  
  
Every third Wednesday of the month: 9:00 a.m. – 4:30 p.m.  
  
Any changes in rental fees, times or dates will be negotiated between the Agency and the Hill City Assembly of God Church.
4. The Hill City Assembly of God Church will provide tables, chairs, heat and light for the Agency to carry out the WIC Clinic. The Agency agrees to leave the premises in the same condition as at the beginning of the Clinic.
5. The Hill City Assembly of God Church shall take all necessary steps to maintain and keep the premises in a safe and clean condition. This shall include (a) sidewalks and parking areas cleared of snow and ice and other obstructions; (b) stairways and walkways cleared of clutter and in safe repair; (c) electrical hazards removed from the Department’s area.
6. This agreement shall continue and be binding upon both parties until September 30th, 2017. Termination of this agreement may be made by either party with sixty (60) days written notice of intention to the other party.
7. The Lessor agrees to abide by all Federal and State nondiscrimination legislation to the effect that no person shall be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination on the basis of race, color, national origin, age, sex, or handicap in regards to the WIC Program.

**WIC AGREEMENT—Hill City**

Aitkin County Health and Human Services

By: \_\_\_\_\_

Printed Name: Tom Burke

Its: Director

Date: \_\_\_\_\_

Hill City Assembly of God Church

By: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Its: \_\_\_\_\_

Date: \_\_\_\_\_

Aitkin County Board of Commissioners

By: \_\_\_\_\_

Printed Name: Mark Wedel

Its: Chairperson

Date: \_\_\_\_\_

Approved as to form and execution:

By: \_\_\_\_\_

Jim Ratz, County Attorney

Date: \_\_\_\_\_

Original Document 9/16

Jl-h:\Contracts\Pubhealth\WIC\2016\Hill City-2016