

# Returned Peace Corps Volunteers of Wisconsin—Madison

## Membership Form



### Membership Benefits

- Community: join our social and professional network of RPCVs
- Activities: e.g., hiking and dining groups, plus fundraising work (Freeze for Food, International Calendar)
- Purchase of the International Calendar and our other products at reduced rates
- Access to our “World Roots” quarterly/periodic newsletter
- Vote on any issue at any meeting, including how International Calendar proceeds are distributed
- Sponsorship of projects for funding through our “Gift Away” grant program
- Participation in drawings to allocate up to \$1000 annually to Peace Corps Partnership Project(s) of one’s choice
- Reduced admission to selected RPCVs of WI-sponsored events

**Paid Membership(s): \$20 per individual per year**

Complimentary Membership for current Peace Corps Volunteers: Free during service

Complimentary Membership for RPCVs completing service within the year or joining for the 1st time: Free for 1 year

Total enclosed \$ \_\_\_\_\_ Date \_\_\_\_\_ **Please write clearly**

Member’s name \_\_\_\_\_

Add’l members’ name(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address(es) \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ (H): \_\_\_\_\_ (W): \_\_\_\_\_

Country/ies of service \_\_\_\_\_ Service dates \_\_\_\_\_

PC Sector \_\_\_\_\_ Birth year (optional) \_\_\_\_\_

Special interests? Comments or questions?

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\_\_\_\_\_

*For RPCVs of WI office use: This membership covers the 12 months from the date above.*

Send this completed form and a check to RPCVs of Wisconsin—Madison, P.O. Box 1012, Madison, WI 53701

Questions? Contact us by email: [rpcvmsnmembers@gmail.com](mailto:rpcvmsnmembers@gmail.com).

If you wish to also join NPCA/National Peace Corps Association in order to impact issues nationally, go to [www.peacecorpsconnect.org/membership](http://www.peacecorpsconnect.org/membership). There is no charge for NPCA individual membership.

## **RPCVs of WISCONSIN–MADISON**

### Privacy Policy

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Annually or upon request (for example, to promote a Peace Corps-sponsored event in Madison), the Returned Peace Corps Volunteers of Wisconsin–Madison (RPCVs of WI) shares the names and contact information of its consenting members with affiliate organizations, currently including the regional Peace Corps (PC) office in Chicago and the National Peace Corps Association (NPCA), as part of a data exchange. This exchange of data is essential for maintaining a complete and up-to-date database. The information shared includes, but is not limited to: full name; country of service; dates of service; home mailing address; email address; and phone number. This information is not sold or transferred to any unaffiliated third party by RPCVs of WI and has been and will be used strictly for communication purposes with our members.

RPCVs of WI will use the shared information received from PC and our members for 1) recruitment and retention of members to RPCVs of WI and NPCA; 2) helping Returned Peace Corps Volunteers (RPCVs) organize reunions of their Peace Corps groups; 3) assisting requestors to find RPCVs by sharing the requestor contact information with the RPCV (thus allowing the RPCVs of WI member to decide whether to contact the requestor); and 4) use related to Third Goal events.

The use by PC of the information contained in the database will be governed by the same policy as RPCVs of WI. Members of RPCVs of WI can decline to have their data shared with NPCA and PC:

**If you do not wish to have your data shared with PC or NPCA, please mail this signed form to the Membership Coordinator.** *Note: No response assumes you agree to have your name shared.*

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**OPT-OUT:** If you prefer that we not disclose contact information about you to affiliated third parties (specifically, PC), you may opt out of those disclosures. That is, you may direct us not to make those disclosures, except as provided in this Notice), by completing this form and mailing it to the address below.

I prefer that my contact information be kept confidential, to be used **only** by the RPCVs of Wisconsin.

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Printed Name

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Date

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Signature

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Phone Number (in case of question)

Mail to:

RPCVs of Wisconsin–Madison  
Attn: Membership  
P.O. Box 1012  
Madison, WI 53701

Or: Send your signed and scanned form to [rpcvmsnmembers@gmail.com](mailto:rpcvmsnmembers@gmail.com).

Questions? Email our **Membership Coordinator** at [rpcvmsnmembers@gmail.com](mailto:rpcvmsnmembers@gmail.com)