

UW-MADISON RETIREMENT ASSOCIATION
Membership for the year ending 6-30-18

Spouses/partners are included in the membership fee and need not have worked for the UW.

Name(s) _____ Phone _____

Address _____ Email _____

City _____ State _____ ZIP+4 _____

UW employment: university/classified staff academic staff faculty associate (non-UW)

Unit/dept. retired from _____ Year _____ Not retired

Topics I/we would like to see in Association programming: _____

Association activities for which I/we offer my/our expertise: _____

Sifter format (choose one): Sent in hard copy OR Sent by email

Regular: \$20 for one year

Bargain: six years for the price of five (\$100)

Life: \$300 nonrefundable
Eligibility: one member of household must be receiving a Wis. Retirement System annuity

Out of area: ZIP codes other than 535, 537, and 539—\$10 for one year or \$50 for six years;
emailed *Sifters* only

Not yet retired: \$10 for one year; emailed *Sifters* only _____

Did someone recruit you to join UWRA and, if so, whom may we thank? _____

Your check should be made payable to the **UW-Madison Retirement Association** and mailed with this completed form to the UW-Madison Retirement Association, 21 North Park Street, Room 7205, Madison 53715-1218.

May 2017

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