

□ New Member

Former Member
<u>Member ID</u>

2014 Associate Membership Application

To expedite your application process, join online at www.aia.org/join

PERSONAL INFORMATION						
Mr. Mrs. Ms.	First		M.I.	Last		
Address					Apartment/Unit #	
City		State/Country			ZIP	
Home Phone		Home E-mail				
Home Fax		Cell Phone			DOB	

COMPANY INFORMATION				
Company Name		Job Title		
Address		Suite/Floor		
City	State/Country	ZIP		
Office Phone	Office E-mail			
Office Fax	Company Web Address			

Mailing Preference: Home Office

Primary Email: Home Office

Primary Phone: Home Office

Home address **OR**

Check to receive the digital version only of ARCHITECT magazine

Periodically, AIA will make its mailing lists available to companies in the build and design industry. If you do not want your mailing address shared, please check here

ELIGIBILITY

Associate Membership Eligibility Requirement (you must meet one of the following to be eligible, however, please check all that apply)

- Professional Degree in architecture—traditional career (copy of degree required)
- Professional Degree in architecture—alternative career (copy of degree required)

☐ Intern (copy of degree required)

ARE candidate (copy of degree required)

I work under the supervision of an architect in a professional capacity (must provide written letter from supervising architect)

I work under the supervision of an architect in a technical capacity (must provide written letter from supervising architect)

I work as a faculty member in a university program in architecture—not licensed.

Degree				
Type of degree (e.g., BArch, MArch)	Year Received	School		

CHAPTER ASSIGNMENT

The AIA is a three-tiered organization requiring membership at the local, state, and national levels. Chapter affiliation is assigned by the zip code of your office or home address. To view a list of chapters, visit <u>www.aia.org/about/structure</u>.

If you need help determining your chapter assignment, contact AIA Information Central at 1 (800) 242-3837, option 2.

Assign me to the local AIA chapter

based on my:

Office address

CODE OF ETHICS

AIA members agree to abide by the AIA Bylaws, the AIA Code of Ethics and Professional Conduct and agree to the Terms & Conditions for membership. To view the Code of Ethics, visit www.aia.org/code of ethics. To view the Terms & Conditions, visit www.aia.org/terms of service.

I agree to abide by the Code of Ethics stated in the AIA Bylaws and Terms & Conditions____

PROFESSIONAL INFORMATION

Type of firm/company with which you are currently	Primary role in firm/company	Are you a previous member of?
employed	Principal/Partner	American Institute of Architecture Students
Architecture—sole practitioner	Department head/Senior manager	(AIAS)
Architecture firm	Architect	_ ` ` `
Multidisciplinary design	Project manager	Associated Student Chapters/AIA
firm/architecture as lead	Engineer	(ASC/AIA)
Multidisciplinary design	Interior designer	□ National Architecture Students Association
firm/architecture not lead	Graphic designer	(NASA)
Corporate business	Construction administrator	I was referred to join the AIA by
Government agency	Specification writer	Local chapter
Construction	CAD manager	State chapter
□ Interior design	Architectural drafter	□ National advertisement/promotion
Landscape	Educator	Promotion Code
Urban design	Are you a member of any of the following	AIA member
University/college	professional organizations?	
Library or association	GBCI LEED AP #	
□ Other	□ USGBC National Member (Company) □ USGBC Local Member (Individual)	

DEMOGRAPHIC INFORMATION (optional)

Ethnicity (optional)	Gender (optional)	Special Needs (optional)	
Black or African American	☐ Male	Hearing disability	
Asian	Female	□ Visual disability	
□ White		Physical disability	
Hispanic or Latino		Other:	
American Indian or Alaska Native			

Native Hawaiian or Other Pacific Islander
Two or More Races

The information gathered by the AIA is used solely for the purpose of fulfilling the AIA's mandate to you. Personal information you provide to the AIA will be used for internal reporting purposes only to ensure we accurately reflect our membership demographics. Any personal information that you provide shall not, without your consent, be disclosed to third parties, except as permitted or required by law.

MEMBERSHIP DUES

To determine your state and local dues, please contact AIA Information Central at 1 (800) 242-3837, option 2. Membership dues are calculated on a calendar year, January to December. New member dues are prorated quarterly. Please submit full payment of your local, state, and national dues.

	Joining between 10/1/13 - 3/31/14		Joining between 4/1/14 - 6/30/14		Joining between 7/1/14 - 9/30/14
National	\$ 108.00	National	\$ 81.00	National	\$ 54.00
State	\$	State	\$	State	\$
Local	\$	Local	\$	Local	\$
TOTAL DUES	\$	TOTAL DUES	\$	TOTAL DUES	\$

PAYMENT For payment plan information, please visit www.aia.org/paybyinstallments. Dues are not a tax-deductible donation, but may be eligible as a business expense deduction. Check (payable to The American Institute of Architects) Credit Card Type: 🗌 Visa ☐ MasterCard American Express Discover Card Number **Expiration Date** Name of Cardholder Signature Please let us know who pays your professional AIA membership dues: 🗌 Firm/company (full payment) 🔲 Firm/company (partial payment) I pay them Please remit application and payment to: The American Institute of Architects | P.O. Box 64185 | Baltimore, MD 21264-4185 E-mail to: memberservices@aia.org | Fax to: (202) 626-7547 **Publisher's Statement** ARCHITECT is the official magazine of the AIA. Your membership dues include a paid subscription to ARCHITECT magazine, at a value of \$29.50 for one year. You can choose to receive

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A membership packet will be mailed to your primary address 2 - 3 weeks after receiving your welcome email, which provides more information regarding resources and benefits from AIA.