



New Member

Former Member

Member ID \_\_\_\_\_

## 2017 Associate Membership Application

If you are new to the AIA, please join online at [www.aia.org/join](http://www.aia.org/join). If you were a member previously, please proceed with completing this application.

### Personal Information

	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

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:

### Associate Membership Eligibility Criteria

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)
- AXP Candidate - NCARB ID# \_\_\_\_\_ (NCARB ID# required)
- ARE Candidate - NCARB ID# \_\_\_\_\_ (NCARB ID# required)
- I work under the supervision of an architect in a professional capacity. (Supervising architect information required)  
Architect Name \_\_\_\_\_ License State \_\_\_\_\_ License # \_\_\_\_\_
- I work under the supervision of an architect in a technical capacity. (Supervising architect information required)  
Architect Name \_\_\_\_\_ License State \_\_\_\_\_ License # \_\_\_\_\_
- I work as a faculty member in a university program in architecture—not licensed.

### Degree Information

Type of degree (e.g., BArch, MArch)	Year Received	School
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### 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 [www.aia.org/about/structure](http://www.aia.org/about/structure).

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:  Home address **OR**  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](http://www.aia.org/code_of_ethics). To view the Terms & Conditions, visit [www.aia.org/terms\\_of\\_service](http://www.aia.org/terms_of_service).

I agree to abide by the Code of Ethics stated in the AIA Bylaws and Terms & Conditions \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_



**Professional Information**

**Type of firm/company with which you are currently employed:**

- Architecture – sole practitioner
- Architecture firm
- Multidisciplinary design firm/architecture as lead
- Multidisciplinary design firm/architecture *not lead*
- Corporate business
- Government agency
- Construction
- Interior design
- Landscape
- Urban design
- University/college
- Library or association
- Other \_\_\_\_\_

**Primary role in firm/company:**

- Principal/Partner
- Department head/Senior manager
- Architect
- Project manager
- Engineer
- Interior designer
- Graphic designer
- Construction administrator
- Specification writer
- CAD manager
- Architectural drafter
- Educator

**Are you a member of any of the following professional organizations?**

- USGBC Local Member (Individual)
- GBCI LEED AP # \_\_\_\_\_
- USGBC National Member (Company)

**Are you a previous member of?**

- American Institute of Architecture Students (AIAS)
- Associated Student Chapters/AIA (ASC/AIA)
- National Architecture Students Association (NASA)

**I was referred to join the AIA by:**

- Local chapter
- State chapter
- National mail or email advertisement  
Promotion Code \_\_\_\_\_
- AIA member \_\_\_\_\_

**Demographic Information (optional)**

**Ethnicity (optional)**

- Black or African American
- Asian
- White
- Hispanic or Latino
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander
- Two or More Races
- Decline to state

**Gender (optional)**

- Male
- Female
- Decline to state

**Special Accommodations (optional)**

- Hearing disability
- Visual disability
- Physical disability
- Other \_\_\_\_\_

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 amounts, please contact AIA Information Central at 1 (800) 242-3837, option 2.

	Dues rates valid between 10/1/16 - 3/31/17		Dues rates valid between 4/1/17 - 6/30/17		Dues valid between 7/1/17 - 9/30/17
National	\$ 114.00	National	\$ 85.50	National	\$ 57.00
State	\$	State	\$	State	\$
Local	\$	Local	\$	Local	\$
<b>TOTAL DUES</b>	<b>\$</b>	<b>TOTAL DUES</b>	<b>\$</b>	<b>TOTAL DUES</b>	<b>\$</b>

**Payment**

Please submit full payment of your local, state and national dues. For payment plan information, please visit [www.aia.org/paybyinstallments](http://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 \_\_\_\_\_ Date \_\_\_\_\_

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](mailto: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 only the digital version of the magazine by selecting the "Digital version only" option in the *Mailing Preference* section of this application. Learn more at [www.aia.org/join](http://www.aia.org/join). Members can choose to have their print edition of ARCHITECT magazine sent to a different individual, such as a local school of architecture or library. Please contact us by phone at (800) 242-3837 (option 2) to facilitate donating your print edition of ARCHITECT magazine. You will begin receiving ARCHITECT magazine at your preferred address 6 to 8 weeks after your application is processed.