

□ Former Member

AIA Member ID

# 2023 Associate Membership Application

Associate membership is open to individuals who have a professional degree in architecture, work under the supervision of an architect, are enrolled in AXP, or are a faculty member in a university program in architecture. New or former members may join/rejoin online at <u>aia.org/join</u>.

## **Personal information**

Prefi	First		M.I.	Last	
Address			1		Apartment/unit #
City State/country				Postal code	
Home phone		Home email			
Cell phone		Date of birth			

## **Company information**

Mailing preference: Home Office	Primary email: Home Office P	rimary phone: Home Office		
Company web address				
Office phon	Office emai			
City	State/country	Postal code		
Address	Suite/floo			
Company name	Job title			

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)
- ARE Candidate NCARB ID#

I work under the supervision of an architect in a professional capacity. (Supervising architect information required) Architect Name\_

License State\_\_\_\_\_ License #\_\_\_\_

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

#### Architecture degree

Type of degree	Month/year	School
	received	

#### Chapter information

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

If you need help determining your chapter assignment, contact Member Services at (800) 242 3837, option 2 or (202) 626 7300, option 2 (outside the US)

Assign me to the local AIA chapter	based on my:	Home address OR	Office addres
0	. ,		

#### 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.

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



# **Demographic information**

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Ethnicity		Gender identity	
Alaskan Native	Black or African American	Female	
American Indian	Hispanic - Cuban	Male	
Asian - Chamorro (Guam)	Hispanic - Mexican	Non-binary	
Asian - Chinese	Hispanic - Puerto Rican	Self-describe	d
Asian - Filipino	Hispanic - Other	Prefer not to	say
Asian - Indian	Middle East^{} or North Africa}		
Asian - Japanese	Native Hawaiian	Disability	
Asian - Korean	White or Caucasian	None	Hard of hearing
Asian - Vietnamese	Other race/ethnicity	Deaf	Visual
Asian - Samoan	Prefer not to say	Blind	Mobility
Asian - Other Pacific Islander		Other	-
Asian - Other			

The demographic information gathered by AIA is used solely for the purpose of fulfilling AIA's mandate to you. Personal information you provide to AIA will be used for internal reporting purposes only to ensure we accurately reflect our membership demographics

## **Professional information**

# Organization type

Architecture - single discipline Multi-disciplinary (architect led) Multi-disciplinary (engineer led) Multi-disciplinary (interior led) Multi-disciplinary (planning led) Design & construction services Building product manufacturer Consulting Engineering Interior Design Landscape Real Estate/Building owner Law Institutional Government/public Non-profit/trade associatio AIA Chapter Press Other	Sole proprietor Executive Office manage{ ^} t/Operations Sustainability Human Resources Finance Legal Sales/business development Project management Design/Planning (e.g., architecture/interior/ landscape design) Technology Specification Construction management Engineering Owner/facilities management Regulatory
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Job role

Consultant Educator Research Student Retired Enthusiast/consumer

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

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

#### Membership dues

To determine your state and local dues, contact AIA Member Services at 1 (800) 242 3837, option 2 or 1+ (202) 626 7300, option 2 (outside the US), or you may also use the online Dues Estimator at <u>duesestimator.aia.org</u>.

	Joining 10/1/22–1/31/23	Joining 2/1/23–2/28/23	Joining 3/1/23–3/31/23	Joining 4/1/23–4/30/23	Joining 5/1/23–5/31/23	Joining 6/1/23–6/30/23	Joining 7/1/23–7/31/23	Joining 8/1/23–8/31/23	Joining 9/1/23–9/30/23
Local Dues	\$	\$	\$	\$	\$	\$	\$	\$	\$
State Dues	\$	\$	\$	\$	\$	\$	\$	\$	\$
National Dues	\$ 134.00	\$ 122.83	\$ 111.67	\$ 100.50	\$ 89.33	\$ 78.17	\$ 67.00	\$ 55.83	\$ 44.67
TOTAL DUES	\$	\$	\$	\$	\$	\$	\$	\$	\$

Membership total dues amounts must be completed for local and state chapters prior to submission.

#### **Payment**

Please submit full payment of your local, state, and national dues. The Dues installment plan is available October 1, 2022–April 30, 2023. To enroll, please visit <u>aia.org/duesinstallment</u>. 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 Typ	e: Visa	MasterCard	American Express	Discover	
Card number	Expiration date	/***************		XXÔXXX		
Name of cardholder	Signature				Date	
Please let us know who pays your professional AIA membersh	ip dues: Firn	n/company (fu	ll payment)	Firm/company (partial pay	yment) I pay them	
Please remit application and payment to:						

By mail: The American Institute of Architects, P.O. Box 64185, Baltimore, MD 21264-4185

Questions? Email us at: memberservices@aia.org. For your security, please do not transmit credit card information by email.