



## 2010 Associate Membership Application (U.S. resident)

### Personal Information *(please print clearly)*

Mr. Mrs. Ms.	First name	M.I.	Last name
Home address			Apartment number
City		State	ZIP
Home phone		Home fax	
Date of birth		Home e-mail	

Company name/Company acronym			Job title
Company address			Suite/floor number
City		State	ZIP
Company phone/direct line	Company fax	Company e-mail	Company Web address

### Architecture Degree *(must provide a copy)*

Type of degree (e.g., BArch, MArch)	Month/Year received	School
Type of degree (e.g., BArch, MArch)	Month/Year Received	School

### Associate Classifications *(select one)*

- Intern
- ARE candidate
- Degree in architecture—traditional career
- Degree in architecture—alternative career
- I work under the supervision of an architect in a professional capacity
- I work under the supervision of an architect in a technical capacity
- I work as a faculty member in a university program in architecture

### Ethnicity *(optional)*

- African American
- Asian/Pacific Islander
- Caucasian
- Hispanic
- American Indian/Alaskan Native
- Subcontinental Asian
- Other \_\_\_\_\_

### Preferred Address *(check one)*

- Office
- Home

- I do not wish to be listed in any membership list sold by the AIA to third parties.

**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**

- Designer
- Project manager
- Engineer
- Interior designer
- Graphic designer
- Construction administrator
- Specification writer
- CAD manager
- Architectural drafter
- Educator
- Controller
- Bookkeeper
- Accounting clerk
- Business development manager
- Marketing manager
- Marketing assistant

- Human Resources director
- Human Resources manager
- Office manager
- Administrative assistant
- Receptionist
- Librarian
- Other \_\_\_\_\_

**Are you a previous member of an AIAS chapter? If yes, check appropriate box.**

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

**Associate Member Enrollment**

**Code of ethics**—AIA members agree to abide by the AIA Bylaws and the AIA Code of Ethics and Professional Conduct.

I agree to abide by the Code of Ethics as they are listed in the AIA Bylaws. \_\_\_\_\_  
Signature

**The AIA is a three-tiered organization requiring membership at the local, state, and national levels.** Local component affiliation is assigned by zip code based on your business or home address.

Assign me to the following component: \_\_\_\_\_

OR

Assign me to the local AIA component based on my:  business address  home address

Membership dues are calculated on a calendar year, January to December. New member dues are prorated quarterly. You may contact your local component or AIA Information Central, 800-242-3837, to determine your annual membership dues.

Associate Dues	Joining between 10/1/09–3/31/10		Joining between 4/1/10–6/30/10		Joining between 7/1/10–9/30/10
National	\$105.00	National	\$79.00	National	\$53.00
State	\$13.00	State	\$10.00	State	\$7.00
Local	\$38.00	Local	\$29.00	Local	\$20.00
TOTAL DUES	\$156.00	TOTAL DUES	\$118.00	TOTAL DUES	\$80.00

**Publisher's statement**

National dues include a \$35.62 subscription cost for *Architectural Record*. This statement is made for auditing purposes only. Subscription costs are *not* deductible from membership dues.

**Method of Payment**

Submit full payment of your local, state, and national membership dues. Dues are not a tax deductible donation but may be eligible as a business expense deduction.

Check enclosed (*payable to the American Institute of Architects*) Charge my:  Visa  MasterCard  AmEx

Card number \_\_\_\_\_ Expiration date \_\_\_\_\_

Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

**Return to:**

The American Institute of Architects  
233 A St. Ste. 200  
San Diego, CA 92101  
Fax to 619-233-4542  
Email to [info@aiasandiego.org](mailto:info@aiasandiego.org)

Office Use Only		
Component executive signature	Date	Component name
Notes:		