The American Institute of Architects

2020 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 aia.org/join.

Personal Information

Prefix	First		M.I.	Last	
Address				Apartment/Unit #	
City		State/Country		Postal Code	
Home Phone		Home E-mail			
Home Fax		Cell Phone		DOB	

Company Information

Company Name			Job Title	
Address			Suite/Floor	
City		State/Country	Postal Code	
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

Chapter Assignment

The 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 aia.org/find-chapter.

If you need help determining your chapter assignment, contact AIA Information Central at 1 (800) 242-3837, option 2 or 1+ (202) 626-7300, option 2 (outside the U.S.)

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. 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 _____
                                                                                                      Signature   Date

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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
☐ Other _____

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 _____
☐ Other _____

Demographic Information (optional)

Race *(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
☐ Prefer not to disclose

Gender *(optional)*
☐ Male
☐ Female
☐ Other _____
☐ Prefer not to disclose

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 (800) 242-3837, option 2 or 1+ (202) 626-7300, option 2 (outside the U.S.)

	Joining between 10/1/19 - 3/31/20		Joining between 4/1/20 - 6/30/20		Joining between 7/1/20 - 9/30/20
Local Chapter Dues	$	Local Chapter Dues	$	Local Chapter Dues	
State Chapter Dues	$	State Chapter Dues	$	State Chapter Dues	
National Dues	$	National Dues	$	National Dues	$
TOTAL DUES	$	TOTAL DUES	$	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 from October 1 - April 30th. For enrollment, please visit www.aia.org/duesinstallment. 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:
By mail: The American Institute of Architects, P.O. Box 64185, Baltimore, MD 21264-4185
Questions? E-mail us at memberservices@aia.org

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. 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 or 1+ (202) 626-7300, option 2 (outside the U.S.) 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.