



New member

Former member _____
Member ID

2012 Associate Membership Application (U.S. Resident)

PERSONAL INFORMATION			
Mr. Mrs. Ms.	First Name	Last	M.I.
Home Address			Apartment/Unit #
City		State	ZIP
Home Phone		Home Email	
Home Fax	Cell Phone		DOB

COMPANY INFORMATION		
Company Address		Suite/Floor
City	State	ZIP
Office Phone	Office Email	
Office Fax	Company Web Address	

Mailing Preference

Primary Address: Home OR Office

Check to receive the digital version only of ARCHITECT magazine: I do not wish to be listed in any membership list sold by the AIA to third parties:

ARCHITECTURE DEGREE	
Type of degree (e.g.BArch, MArch)	School
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Associate classification (check all that apply)

- Intern
- ARE candidate
- Professional Degree in architecture - traditional career (must provide a copy)
- Professional Degree in architecture - alternative career (must provide a copy)
- 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 - not licensed

Ethnicity (optional)

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

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 Only" option in your AIA member record. Learn more at www.aia.org/renew. Members can choose to have their print edition of ARCHITECT Magazine sent to a different individual, such as the local school of architecture or library. Please contact us by phone at 800-242-3837(option 2) and let us know you wish to donate 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.

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 shall not, without your consent, be disclosed to third parties, except as permitted or required by law.

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

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

- GBCI LEED AP # _____
- USGBCI National Member (Company)
- USGBCI Local Member (Individual)

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)

I was referred to join the AIA by (check only one):

- Local chapter
- State chapter
- National advertisement
Promotion Code _____
- AIA member _____
Name

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 stated in the AIA Bylaws. _____

To view the full code of ethics, visit <http://www.aia.org/about/ethicsandbylaws/index.htm> Signature

The AIA is a three-tiered organization requiring membership at the local, state, and national levels. Local chapter affiliation is assigned by the ZIP code of your business or home address. Assign me to the local AIA chapter _____ based on my:

- home address
- work address

Contact your local chapter or call AIA Information Central, 800-242-3837 option 2, to determine your state and local dues. Membership dues are calculated on a calendar year, January to December. New member dues are prorated quarterly. *Without the correct dues amount, the processing of your application may be delayed.*

Associate Dues	Joining between 10/1/11 – 3/31/12		Joining between 4/1/12 – 6/30/12		Joining between 7/1/12 – 9/30/12
National	\$106.00	National	\$79.50	National	\$53.00
State	\$	State	\$	State	\$
Local	\$ 110.00	Local	\$ 82.50	Local	\$ 55.00
TOTAL DUES	\$	TOTAL DUES	\$	TOTAL DUES	\$

Method of Payment

Submit full payment of your local, state, and national membership dues. Payment plans are available visit www.aia.org/paybyinstallments for more information. 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 Discover

Card number _____ Expiration date _____

Cardholder _____ Signature _____

Please let us know who pays your professional AIA membership dues? (Please check one)

- Firm/Company*
- Myself*
- Partial payment from Firm/Company*

Return to:

The Boston Society of Architects
 Membership/AIA Western MA
 290 Congress Street, Suite 200
 Boston MA 02210 (Fax to: (617) 951-0845 | E-mail to: membership@architects.org)

Office Use Only		
Chapter executive signature _____	Date _____	Chapter name _____
Notes:		