



☐ New Member

☐ Former Member _____
AIA Member ID

2024 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 email		
Cell phone	Date of birth		

Company information

Company name		Job title
Address		Suite/floor
City	State/country	Postal code
Office phone	Office email	
Company web address		

Mailing preference: ☐ Home ☐ Office

Primary email: ☐ Home ☐ Office

Primary phone: ☐ Home ☐ Office

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.

Architecture degree

Type of degree	Month/year received	School
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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 aia.org/find-chapter

If you need help determining your chapter assignment, contact Member Support 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 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.

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



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Demographic information

Ethnicity Primary

- ☐ Hispanic/Latino
☐ Caucasian
☐ Black or African American
☐ Indigenous American
☐ Asian
☐ Middle Eastern and North African
☐ Other Race/Ethnicity _____
☐ Prefer not to say

Ethnicity Secondary

- ☐ Hispanic - Mexican
☐ Hispanic - Puerto Rican
☐ Hispanic - Cuban
☐ Hispanic - Other _____
☐ Caucasian
☐ Black or African American
☐ American Indian
☐ Native Hawaiian
☐ Alaskan Native
☐ Asian - Indian
☐ Asian - Japanese
☐ Asian - Chinese
☐ Asian - Korean
☐ Asian - Filipino
☐ Asian - Vietnamese
☐ Asian - Samoan
☐ Asian - Chamorro (Guam)
☐ Asian - Other Pacific Islander
☐ Asian - Other _____
☐ Middle Eastern
☐ North Africa

Gender identity

- ☐ Female
☐ Male
☐ Non-binary
☐ Self-described _____
☐ Prefer not to say

Orientation

- ☐ LGBTQIA+

Disability

- ☐ None ☐ Hard of hearing
☐ Deaf ☐ Visual
☐ Blind ☐ Mobility
☐ 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

Job role

- ☐ Sole proprietor
☐ Executive
☐ Office management/Operations
☐ Sustainability
☐ Human Resources
☐ Finance
☐ Legal
☐ Sales/business development
☐ Project management
☐ Design/Planning (e.g., architecture/interior/landscape design)
☐ Technology
☐ Specifications
☐ Construction management
☐ Engineering
☐ Owner/facilities management
☐ Regulatory
☐ 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 duesestimator.aia.org.

JOINING									
	10/1/23- 01/31/24	2/1/24- 2/28/24	3/1/24- 3/31/24	4/1/24- 4/30/24	5/1/24- 5/31/24	6/1/24- 6/30/24	7/1/24- 7/31/24	8/1/24- 8/31/24	9/1/24- 9/30/24
Local Dues	\$	\$	\$	\$	\$	\$	\$	\$	\$
State Dues	\$	\$	\$	\$	\$	\$	\$	\$	\$
National Dues	\$138.00	\$126.50	\$115.00	\$103.50	\$92.00	\$80.50	\$69.00	\$57.50	\$46.00
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, 2023–April 30, 2024. To enroll, please visit 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 _____ CVV code _____

Billing address _____

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–Membership, PO Box 830080, Philadelphia, PA 19182-0080

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