

## New-Graduate Membership Application

In order to take advantage of the new-graduate offer, you must have graduated within the past 18 months with a professional degree in architecture from an accredited school of architecture.

**Personal Information** *(Print your name clearly as you want it to appear on your membership certificate and card.)*

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

\*Your birth date enables the AIA Trust to issue new architect members a \$15,000 life insurance policy premium free for one year.

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

**Preferred address** *(check one)*

Mail (for print materials including *Architectural Record*):  Home OR  Office  
 E-mail (for correspondence):  Home OR  Office  
 I do not wish to be listed in any membership list sold by the AIA to third parties.

**Architecture degree** *(To avoid processing delays, your application must include a copy of your diploma[s] or transcript[s].)*

Type of degree (e.g., BArch, MArch)	Year received	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 \_\_\_\_\_

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 previous member of an AIA chapter? If yes, check appropriate box.

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

**New-Graduate 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. \_\_\_\_\_  
Signature

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

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

Only individuals who have graduated with a professional degree in architecture from an accredited school during the 2008–2009 school year are eligible to apply. You must provide a copy of your diploma(s) or transcripts(s) in order to receive the complimentary membership at the national level.

New-Graduate Dues	Joining between 10/1/08–3/31/09	Joining between 4/1/09–6/30/09	Joining between 7/1/09–9/30/09
National	\$0.00	\$0.00	\$0.00
State	\$0.00	\$0.00	\$0.00
Local	\$0.00	\$0.00	\$0.00
<b>TOTAL DUES</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>

You will begin receiving *Architectural Record* at your preferred address 6 to 8 weeks after your application is processed.

**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  
P.O. Box 64185  
Baltimore, MD 21264-4185  
Fax to 202-626-7547  
E-mail to MemberServices@aia.org

Office Use Only		Palomar
Courtney B. Kalashian		_____
Component executive signature	Date	Component name
Notes:		