



AIANJ ALLIED INDIVIDUAL MEMBERSHIP APPLICATION

Allied Membership is for individuals employed outside of the architectural practice but who are involved in a position allied to the field of architecture

Full Name :

Primary Contact (if different from applicant) :

Company :

Address :

City, State, Zip :

Phone : Fax :

Website : Email :

Dues Table

State Dues: \$265

Local Dues:

Architects League \$350

Central Jersey \$55

Jersey Shore \$75

Total \$

Newark & Suburban Contact

Robert Epstein: aia.newark.suburban@gmail.com

South Jersey Contact

Peter Farrell, AIA: pfarrell@mmpfa.com

West Jersey Contact

president@aiawestjersey.org

DESCRIPTION OF PRODUCTS AND SERVICES:

DECLARE THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE.

Signature Of Author _____ Date _____

Check Enclosed. (Make check for AIA dues payable to the American Institute of Architects)

Charge my Visa Amex Mastercard Total Charges \$ _____

CREDIT CARD INFORMATION

Credit Card Billing Address (if different from above)

Company :

Address :

City, State, Zip :

Credit Card Number :

Expiration Date : _____ CVV2 : _____

Fees are not deductible as charitable contributions for federal income tax purposes.
But maybe deductible as a business expense

Return applications or forward any questions to: Kelly Biddle, kbiddle@njpsi.com