



AIA

2019 Dues Installment Program Authorization - Updated Payment Method Request

Date _____ Member Number _____ Chapter Name _____

Member Name _____

E-Mail _____ Contact Telephone: _____

Agreement

I hereby request The American Institute of Architects to charge the credit/debit card listed below, in the frequency requested, for payment of my 2019 annual dues for membership in The American Institute of Architects.

This 2019 agreement will remain in effect until the completion of my installment payments or until The American Institute of Architects receives a written notice of cancellation of my 2019 membership from me or my financial institution.

I understand that I will remain responsible for payment of my 2019 membership dues to The American Institute of Architects should the account listed below for my payments become invalid during my payment schedule.

Member Signature (required)

(Through your signature, you acknowledge and agree to all the statements and terms shown above.)

Updated Account Information

I authorize The American Institute of Architects to make monthly withdrawal payments for the payment of my 2019 annual membership dues to The American Institute of Architects.

Please fill out the information that corresponds with your payment option:

VISA American Express MasterCard Discover

Credit/Debit Card Number _____

Name of Card Holder _____

Signature _____

Please use this card effective: _____ / _____ / _____

Return completed form by secure fax to (202) 626-7547

****For your protection, please do not transmit credit card information by email****