

□ New member	
☐ Former member	
	Member ID

Student Membership Application

Student membership is open to students currently enrolled in a local architectural program.						
Personal Information (Print your name clearly)					
Mr. Mrs. Ms. First name	M.	.l.	Last name			
Home address			Apartment number			
City	St	ate	ZIP	Country		
Home phone	Home fax		Cell phone			
Date of birth (Optional)	nal) Home e-mail					
		e student status - either a n e indicating full time status.		gistrar's office		
School			Program/Area of study			
School address	ress		Suite/floor number			
City	St	ate	ZIP	Country		
School phone	St	udent e-mail				
Preferred Address (check Mail (for print materials): E-mail (for correspondence) I do not wish to be li	☐ Home OR ☐ Home OR	☐ School ☐ School old by the AIA to third parties.				
Student Membership D Membership is based on		Joining between 4/1/18–6/30/18	Joining between 7/1/18–9/30/18	prorated quarterly.		
	·	s. All payments and refunds	-			
Card number		Expiration date		CVV		
Cardholder		Signature				

Return to:

ATTN: Membership AIA San Francisco 130 Sutter Street, Suite 600 San Francisco, CA 94104 E-mail to membership@aiasf.org Please allow 6-8 weeks from receipt of your application for processing. Your membership is valid from the time your application is received by AIA San Francisco, given that your application is completed and includes valid payment information. After your application is processed, you will receive an e-mail confirmation.