



AIA Bucks County

2024 Allied Membership Application

Contact & Directory Information

Please check one: New Member Membership Renewal

Name: _____

Company: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Website: _____

Referred by: _____

Membership & Sponsorship Opportunities

Annual Allied Membership Dues (REQUIRED)..... \$ 250

Benefits of membership include:

- company contact information listed on chapter website
www.aiabuckscounty.org
- company and representative name listed on chapter email blasts
- opportunity to email the membership as approved by the Board
- invitation to chapter events at member price for one representative

Discount for Participating Board Members.....- \$ 50

I am interested in being contacted regarding sponsorship opportunities (OPTION)

Total Amount Due:.....\$_____

Please complete the form and email a copy to buckscountyaia@gmail.com. Mail your completed form and payment to the address listed below. Checks should be made payable to: "The Bucks County Chapter of the American Institute of Architects."

*Mail to: Membership Director
AIA Bucks County
P. O. Box 134
Doylestown, PA 18901*

If you have any questions, please contact the Membership Director, either at the chapter email address or the contact information provided on the chapter website (www.aiabuckscounty.org).