



P.O. Box 1115,
 Jericho Center, VT 05465
 802.448.2169
 E-mail: info@aiavt.org
 Website: www.aiavt.org

Application for Reciprocal Membership

Name _____

AIA Member # _____ Primary AIA Chapter _____

Home Address: City/State/Zip _____

Phone Number ____/____/____ Email _____

Firm Name _____

Firm Address: Street/City/State/Zip _____

Firm Phone Number ____/____/____ Firm Email _____

Are you the sole principal in your firm? Yes ____ No ____

PAYMENT

One-year Reciprocal Membership \$195 ____

Optional Image Placement:

Image (e.g., logo, head shot, project photo)
 next to listing on the AIAVT website \$100 ____

Total Amount Due _____

Please make check payable to “AIA Vermont” and send along with this form to the address above.

 Applicant’s Signature

 Date

You will be entitled to all the rights of an AIA Vermont member, except the right to vote or serve on the AIAVT Board of Directors. Benefits of membership include:

- Subscription to AIAVT communications bulletins
- Invitations to all AIAVT events and meetings and right to attend at member rates
- Opportunity to serve on AIAVT committees
- Right to place employment ads on the AIAVT website at member rates
- Opportunity to enter Vermont projects in the AIAVT Annual Design Awards