

# Allied Membership Application

## Contact & Billing Information:

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_

## Directory Information (if different from above):

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_

## Member/Sponsorship Opportunities

- Annual Allied Membership ..... \$ 200
- Chapter Meeting Sponsorship ..... \$ 250
- Allied Member Night Booth..... \$ 50
- Allied Member Night Hors d'oeuvres Sponsorship..... \$ 250
- Design Awards – Tabletop Sponsorship ..... \$ 150
- Design Awards – Cocktail Sponsorship ..... \$ 500

**Total Amount Due:** ..... \$ \_\_\_\_\_

## Payment Method

- Check to: AIA Eastern Pennsylvania, 208 N. Third Street, Suite 400, Harrisburg, PA 17101
- Please invoice the company at the billing address above.

**Please complete the form and fax to (717) 236-5407.**