



## 2017 Chapter Transfer Request

AIA Bylaws – 2.07 Component Assignment

2.072 Assignment/Transfer. At the written request of a member, the Institute shall transfer the member's assignment from one chapter to another provided that the transferring member either lives or works within the territory of the new chapter.

### Personal Information

	First	M.I.	Last
Address			Apartment/Unit #
City	State/Country		ZIP
Home Phone	Home E-mail		
Home Fax	Cell Phone	DOB*	

\*Your birth date enables the AIA Trust to issue new architect members a \$15,000 life insurance policy premium free for one year.

### Company Information

Company Name		Job Title
Address		Suite/Floor
City	State/Country	ZIP
Office Phone	Office E-mail	
Office Fax	Company Web Address	

**Mailing Preference:**  Home  Office

**Primary Email:**  Home  Office

**Primary Phone:**  Home  Office

### Chapter Information

I have recently moved and request a chapter transfer to AIA \_\_\_\_\_ based on my:  Home address **OR**  Office address

**Please return by mail, fax or e-mail:**

Western Massachusetts AIA/AIA, 290 Congress Street Suite 200, Boston, MA 02210-1024  
E-mail to: [membership@architects.org](mailto:membership@architects.org) | Fax to: (617) 951-0845