



**AWI** ARCHITECTURAL  
WOODWORK  
INSTITUTE

# Ohio Valley Chapter

Indiana ~ Ohio ~ Kentucky



## AFFILIATE MEMBERSHIP APPLICATION

I hereby apply for membership as an AFFILIATE MEMBER of the Ohio Valley Chapter of the Architectural Woodwork Institute with the understanding that this application is subject to acceptance by the Board of Directors of this Association. Affiliate membership is available to *individuals* who qualify, typically architects, design professionals, general contractors, educators, and students.

To become an Affiliate Member, I understand that I do not need to be a member of the National Architectural Woodwork Institute.

Upon Acceptance of this application by the Association, and payment of dues by us, I will be eligible to participate in all of the promotional benefits to this Association, including:

1. Participating in meetings and activities of the Association.
3. Receiving the quarterly reports of the Architectural Representative.

**SCHEDULE OF ANNUAL DUES - \$75.00**  
**(Students - \$25.00)**

By submitting application, the company is committed to pay for and maintain membership in the Ohio Valley Chapter/A.W.I. for at least one year.

We agree to abide by the By-Laws of this Association:

COMPANY \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Name of Representative to whom all correspondence should be mailed:

NAME \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_



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## AFFILIATE MEMBER APPLICATION

*\*represents  
required information*

### MAILING INFORMATION

Company Name\* \_\_\_\_\_

Physical Address\* \_\_\_\_\_

Mail Address (if different) \_\_\_\_\_

City\* \_\_\_\_\_

State/Province\* \_\_\_\_\_

Postal Code\* \_\_\_\_\_

Country\* \_\_\_\_\_

Phone\* \_\_\_\_\_

Fax\* \_\_\_\_\_

Toll Free No. \_\_\_\_\_

Company eMail \_\_\_\_\_

eMail Address\* \_\_\_\_\_

Company Web Site \_\_\_\_\_

**Member Fees:**  
(Architect, Interior  
Designer or Student)

### PRIMARY CONTACT

**Name of Company Principal** \_\_\_\_\_

Title \_\_\_\_\_

Contact eMail \_\_\_\_\_

**Name of Additional Contact** \_\_\_\_\_

Title \_\_\_\_\_

Contact eMail \_\_\_\_\_

**Name of Additional Contact** \_\_\_\_\_

Title \_\_\_\_\_

Contact eMail \_\_\_\_\_

### COMPANY INFORMATION

**Number of Employees in your firm:**

1-9

10-19

20-49

50-99

Over 100

**Is the majority of your work:**

Commercial

Industrial

Residential



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## AFFILIATE MEMBER APPLICATION

### COMPANY INFORMATION (continued)

**Job Function  
(check only one)**

- Architect
- Interior Designer
- Specifier
- Engineer
- General Contractor
- Construction
- Manager
- Facility Manager
- Estimator
- Owner
- Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Company's Primary  
Business Activity**

- Do You**
- Specify
  - Approve

*(check all that apply)*

- Architecture
- Interior Design
- Industrial Architecture
- General Contracting
- Engineering
- Building Development
- Corporation with in-house
- Government Agency
- School, Library
- Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Company's Primary  
Business Activity**

- Do You**
- Specify
  - Approve

*(check all that apply)*

- Architectural Woodwork
- Custom Furniture
- Laminates
- Special Finishes
- Doors
- Windows
- Hardware
- Stone, Metal, Glass
- Accessories
- Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_