Association of Ethiopian Architects

AEA

MEMBERSHIP APPLICATION AND UPGRADING FORM

TO BE FILLED BY THE APPLICANT MEMBER

Name in Full _____ Sex: ☐ Female ☐ Male

(If company, please include details of the Principal)

Date of Birth _____ _____ _____ Nationality _____

Day Month Year

Professional Degrees* 1st: _____Received in _____Received From _____

2nd: _____Received in _____Received From _____

Other: _____Received in _____Received From _____

Professional License Number*

GAR _____PAR _____ PPAR _____OTHER_____

Address Current Work Place: _____

Mailing Address: _____

Telephone: Work _____Mobile _____Home _____

Fax _____ Email _____

Type of Membership	Annual Membership Fee (Birr)
☐ Junior Corporate Member (GAR, PAR)	250.00
☐ Senior Corporate Member (PPAR)	350.00
☐ Student Member:	10.00
☐ Organizational Member	1,500.00
☐ Affiliate Member	1,000.00
☐ Affiliate, Organizational Member	2,000.00

The above information is accurate to the best of my knowledge.

Date: _____ Signature _____

*Attach copy of degrees, license and portrait picture. For organizations, please attach copy of company's license, professional license of owner and company's profile.

Membership fee can be settled through AEA's CBE, China Africa branch, account no. 1000233095935

Note: Please don't forget to take your receipt, if cash paid and send the bank receipt if bank deposited.

For Office use only

AEA TREASURER _____SIGNATURE _____DATE_____

☐ ACCEPTED FOR _____MEMBERSHIP_____RIGISTERED ON _____REG.NO._____

☐ NOT ACCEPTED

REMARKS _____Email: *ethiopianarchitectsassociation@gmail.com*