



# DBIA MEMBERSHIP RENEWAL

## MEMBERSHIP RENEWAL CATEGORIES:

INDUSTRY PARTNER       INDIVIDUAL      MEMBER #: \_\_\_\_\_

### Contact Information (Industry Partners Please List Primary Contact):

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_ Professional Credentials (e.g. DBIA, AIA, PE, LEED AP, etc.) \_\_\_\_\_  
 Job Title \_\_\_\_\_ Company/Agency/University \_\_\_\_\_  
 Street Address \_\_\_\_\_ City/State/Zip/Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email (required) \_\_\_\_\_  
 Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M  F  Alternate Email \_\_\_\_\_

### Job Function (check one):

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Architect                      | <input type="checkbox"/> Design Manager              | <input type="checkbox"/> Program Manager               |
| <input type="checkbox"/> Attorney/Legal Professional    | <input type="checkbox"/> Engineer                    | <input type="checkbox"/> Project Manager               |
| <input type="checkbox"/> Business Development/Marketing | <input type="checkbox"/> Estimator                   | <input type="checkbox"/> Real Estate Developer         |
| <input type="checkbox"/> Construction Manager           | <input type="checkbox"/> Executive/Senior Management | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Consultant                     | <input type="checkbox"/> Operations Professional     |  |
| <input type="checkbox"/> Contracting Specialist/Officer | <input type="checkbox"/> Owner Representative        |  |

### Market Sectors of Interest (check all that apply):

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Aviation                         | <input type="checkbox"/> Government – State/City/County/Municipal      | <input type="checkbox"/> Transportation (other than Aviation)                  |
| <input type="checkbox"/> Civic/Assembly                   | <input type="checkbox"/> Healthcare/Medical Facilities                 | <input type="checkbox"/> Utility (other than Energy/Power or Water/Wastewater) |
| <input type="checkbox"/> Commercial Buildings             | <input type="checkbox"/> Hospitality                                   | <input type="checkbox"/> Water/Wastewater                                      |
| <input type="checkbox"/> Educational Facilities           | <input type="checkbox"/> Industrial Process and/or Research Facilities | <input type="checkbox"/> Other (please specify): _____                         |
| <input type="checkbox"/> Energy/Power                     | <input type="checkbox"/> Office Buildings                              |  |
| <input type="checkbox"/> Faith-Based                      | <input type="checkbox"/> Rehabilitation, Renovation and/or Restoration |  |
| <input type="checkbox"/> Government – Federal/Military    |  |  |
| <input type="checkbox"/> Government – Public Institutions |  |  |

### Payment Information: Amount: \$ \_\_\_\_\_

Check      Credit Card:  Visa       MasterCard       AMEX

Credit Card Number \_\_\_\_\_ V-Code \_\_\_\_\_ Expiration Date (MM/YY) \_\_\_\_\_

Name as it appears on card (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

*DBIA membership must be renewed annually and is non-refundable. Dues are tax deductible as ordinary and necessary business expenses under IRS Tax Code Section 162(3) except for that portion allocable to "lobbying" under Public Law #103-66. (DBIA estimates that 97% of your dues payment is deductible and 3% non-deductible.)*

**Return completed form with payment to:**  
DBIA Membership Dept., 1331 Pennsylvania Ave NW, 4<sup>th</sup> Floor, Washington, DC 20004  
or email to [membership@dbia.org](mailto:membership@dbia.org)