



DBIA Industry Partner Contact Information

Please fill out this sheet listing the following information for any alternate contacts. Make copies if necessary. Return completed form(s) to: **DBIA Membership Dept., 1331 Pennsylvania Ave NW, 4th Floor, Washington, DC 20004** or email to membership@dbia.org.

_____	_____	_____
Full Name	Title	Professional Credentials (e.g., DBIA, AIA, PE, etc.)
_____	_____	
Company Name	Street Address	

City/State/Zip		
_____	_____	_____
Phone	Fax	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/Sales/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 | | |

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