

Application No.

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document H301

Application for Membership

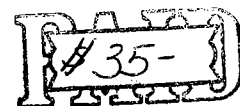
See Part 3, Instruction Sheet, for current dues and instructions.

1. My name is Mr. ☒ Mrs. ☐ Ms ☐ Miss ☐ Gerald P. Adkins
2. I am a legal resident of the United States of America.
3. My residence is Route 1, Box 48F (509) 466-4539
- | City | County | State | Zip |
|-----------------|---------|-------|-------|
| Nine Mile Falls | Spokane | WA | 99206 |
4. My business firm and address are Walker McGough Foltz Lyerla, P.S. (509) 838-8681
- | City | County | State | Zip |
|---------|---------|-------|-------|
| Spokane | Spokane | WA | 99201 |
- Please use my business address as my mailing address.
(business) or (residence)
5. My Social Security number is 525-68-7660
6. I desire to be a member of Spokane Chapter, AIA. It is my understanding that if elected I also will be a member of the AIA state organization.
7. I declare that I will comply with the Code of Ethics and Professional Conduct, which are attached hereto: and the Bylaws; and the Rules and Regulations supplementary thereto; and that I understand the duties; responsibilities, and obligations of a member of the AIA; and that I have read and understand all the information contained in this form and its attachment.
8. I am not indebted to the AIA or to any of its component organizations.
9. I enclose my check for the admission fee and the first year's annual dues, of which \$8.00 is for a year's subscription to the JOURNAL of the AIA. It is my understanding that if I am not admitted to membership, the dues will be returned to me, and the admission fee retained by the AIA as an examination fee.

Date August 24, 1978

OCT 18 1978

(Applicant's signature)



BACKGROUND

10. Date of birth 01/26/37 11. Place of birth Duncan, Oklahoma

12. I am licensed to practice architecture in the following states, with the years first registered in each: (Attach evidence that license is current in one state; see instruction sheet.)

Washington	-	1970	NCARB	-	1972
Colorado	-	1974			
Idaho	-	1975			
Montana	-	1975			

EDUCATION

13. I attended colleges and universities as follows:

Name	Location	No. of Years	Year of Graduation	Degree
University of Southern California	Los Angeles	2	--	--
University of New Mexico	Albuquerque	4	1965	Bachelor of Architecture

PROFESSIONAL TRAINING AND PRACTICE

14. I have been employed or in practice during the past three years as follows: (Be sure to include current employment or practice.)

Employer's Name and Address	Employer's Business	Position	Period of Employment From To
Walker McGough Foltz Lyerla North 120 Wall Street Spokane, WA 99201	Architecture	Project Designer	1969 - 1975
James, Hicks, Adkins Washington Mutual Building Spokane, WA 99201	Architecture	Partner	1975 - 1976
University of Idaho Moscow, ID 83843	Visiting Distinguished Architect		1975 - 1976
Walker McGough Foltz Lyerla, P.S. North 120 Wall Street Spokane, WA 99201		Project Designer Partner	1977 - 1978 1978 - Present

Note: If employed by other than an architectural or architectural engineering firm, please attach an explanation of (a) the nature of your firm's operation and whether it offers architectural services to the public (b) a brief job description (c) whether you hold ownership in the firm. This does not apply to architects in government, architectural education, or journalism.

BUSINESS AFFILIATIONS

15. Do you participate or own an interest in any business which could prejudice your professional judgment? Yes ☐ No ☒ (if yes, please explain.)

PRESENT OR PAST AIA OR CHAPTER MEMBERSHIPS

16. I am or previously have been a member of the AIA or of an AIA Chapter: Yes ☐ No ☒ If yes, give (a) classification of membership (b) name of chapter (c) dates of membership (c) reason for termination.
17. I previously have been rejected for membership in the AIA or an AIA Chapter: Yes ☐ No ☒ If yes, give (a) classification of membership (b) name of chapter (c) year of rejection.

REFERENCES

18. Five references are required, at least three of whom shall be members of the AIA in good standing. Member references must be available for personal contact by the local chapter officers:

* Type or print full names of references.

<u>Bruce M. Walker</u>	AIA	<u>N. 120 Wall St., Spokane, WA</u>	<u>838-8681</u>
<i>* Member</i>		<i>Address</i>	<i>Phone</i>
<u>John W. McGough</u>	F AIA	<u>N. 120 Wall St., Spokane, WA</u>	<u>838-8681</u>
<i>* Member</i>		<i>Address</i>	<i>Phone</i>
<u>Walter W. Foltz</u>	AIA	<u>N. 120 Wall St., Spokane, WA</u>	<u>838-8681</u>
<i>* Member</i>		<i>Address</i>	<i>Phone</i>
<u>Gordon E. Ruehl</u>	AIA	<u>N. 120 Wall St., Spokane, WA</u>	<u>838-8681</u>
		<i>Address</i>	<i>Phone</i>
<u>Gerald A. Winkler</u>	AIA	<u>N. 120 Wall St., Spokane, WA</u>	<u>838-8681</u>

OPTIONAL INFORMATION

Please complete the following if you wish:

19. I have been awarded the following scholarships or other honor awards:

20. I have traveled in the following countries:

21. Marital Status: Single ☐ Married ☒ If married, please give spouse's name Katherine A.

22. Race: (Caucasian, Black, Oriental) Caucasian

23. Other organizations in which you hold membership: _____

STATE OF WASHINGTON

ARCHITECT REF # AD-KI-NG-P63486

ADKINS,GERALD P.
RT 1 BOX 48F
NINE MILE FALLS WA 99026

G. J. Adams

DIRECTOR

NUMBER	Expiration Date
208-00 0002167	01-26-79



THE AMERICAN INSTITUTE OF ARCHITECTS

PLEASE READ CAREFULLY

The Chapter is responsible for the preliminary investigation of prospective members, particularly as to possible contracting or other business interests which might compromise professional integrity. This form should accurately reflect the results of such investigation.

Favorable Recommendation of Chapter on Application for Membership

The Board of Directors
The American Institute of Architects

I, the undersigned SECRETARY of the SPOKANE
(NAME OF OFFICER)

Chapter, AIA, do hereby certify that the following is a true copy of a resolution adopted by the Executive Committee of this Chapter at a duly called meeting thereof held on 2 OCTOBER 1978

RESOLUTION

"Whereas, GERALD P. ADKINS having his/her legal
(NAME OF APPLICANT)

residence ☒ principal place of business ☒ within the territory of this Chapter duly applied on
28 AUGUST, 19 78 for AIA MEMBERSHIP

(CORPORATE MEMBERSHIP OR AIA
ASSOCIATE MEMBERSHIP, AS THE CASE MAY BE)

in the AIA; and

"Whereas, the Executive Committee of this Chapter has examined the statements made by the applicant for such membership and has checked the references and believes that the statements are true and correct and that the applicant is of integrity and ability and of honorable standing in this community and able to undertake the financial obligations of such membership in the AIA and this Chapter; and

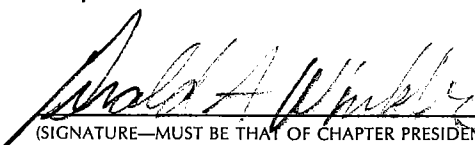
"Whereas, the Executive Committee of this Chapter has made a reasonable attempt to obtain confirmation from all other Chapters in which the applicant has been a member, in any associate status certifying to good standing therein and is satisfied that the applicant is in good standing; therefore, be it

"Resolved, that the SPOKANE Chapter, AIA, vouches

for the honorable character and standing of GERALD P. ADKINS
(NAME OF APPLICANT)

an applicant for AIA MEMBERSHIP in the AIA, and recommends
(CORPORATE MEMBERSHIP OR AIA
ASSOCIATE MEMBERSHIP, AS CASE MAY BE)
admission to such membership in the AIA and this Chapter."

Date 2 OCTOBER, 19 78


(SIGNATURE—MUST BE THAT OF CHAPTER PRESIDENT OR SECRETARY)



THE AMERICAN INSTITUTE OF ARCHITECTS

October 26, 1978

Mr. Gerald P. Adkins, AIA
Walker McGough Foltz Lyerla
North 120 Wall Street
Spokane, Washington 99201

Dear Mr. Adkins:

The Board of Directors of The American Institute of Architects takes pleasure in informing you of favorable action on your application and welcomes you to membership in The Institute.

In the near future, you will receive some literature about The Institute and a lapel emblem. You will also receive a certificate of membership, either directly from The Institute or through formal presentation by your Chapter.

You are assigned to the Spokane Chapter and Washington State Council of Architects of the AIA, effective October 26, 1978.

I sincerely hope that you will take an active part in your Chapter and its professional development and community improvement activities. Many of the policies and programs which advance our profession are developed in this way. Such activities give you, as a professional, the opportunity to develop leadership capabilities and to help the AIA meet the challenges and opportunities which the future holds for the architectural profession.

In behalf of our national staff, David Olan Meeker, Jr., Executive Vice President, joins with me in extending welcome, congratulations and best wishes for success. Please feel free to call on any of us, or the Chapter or Institute officers and staff, at any time the need arises.

Sincerely yours,

Elmer E. Botsai, FAIA
President

cc: Spokane Chapter, AIA
Washington State Council of Architects, AIA

Member
Associate membership
Advancement Form)

APPLICATION FOR AIA MEMBERSHIP

TS3

Source Code

Fill out all parts of this form; read instructions on reverse side carefully and complete supplemental dues information, if applicable. Use advancement form if currently an associate member.)

Mr. ☒ Mrs. ☐
Ms. ☐ Miss ☐

Name GERALD P. ADKINSDate of Birth 26 JAN 37Spouse's Name SHIRLEY A. ADKINS

2. Address

Residence 218 1ST AVE. SO. SUITE 608Phone 206-622-3084SEATTLE

CITY

WA.

STATE

98104

ZIP

Firm or Organization Name THE ADKINS GROUPYour Title (please be specific) ARCHITECT/SOLE PROPRIETORAS ABOVE

STREET

CITY

Phone

CITY

STATE

ZIP

FOR MAILINGS, please use my ☐ Business ☒ Residence address.

PRIMARY PROFESSIONAL ACTIVITY—Please check only ONE category to indicate your primary professional field of employment (numbered by BPA standards).

- ☒ 1 Architectural, Architectural-Engineering Firm or Architect or Architect-Engineer in Private Practice ☐ 2 Consulting Engineering Firm or Engineer in Private Practice ☐ 3 Design Firm (a. ☐ Architectural; b. ☐ Interior; c. ☐ Landscape; d. ☐ Other) ☐ 4 Contractor or Builder ☐ 5 Government ☐ 6 Commercial/Industrial/Institutional (including manufacturers, stores, hotels, restaurants, transportation companies, utilities, institutions, hospitals, churches, banks, savings & loans, mortgage companies, realty companies, developers, insurance companies, and shopping centers) ☐ 7 University, College, or School (a. ☐ Academic, Personnel, or Library; b. ☐ Student) ☐ 8 Public Library, Professional Club, Society, or Trade Association ☐ 9 Other (please specify) _____

3. I am applying for membership in The American Institute of Architects and assignment to the SEATTLE Chapter of the AIA, and understand that upon acceptance I will also be enrolled as a member of the state organization. I understand that I will be responsible for payment of the fixed dues of these respective organizations.

I was encouraged to join the AIA by _____ of the _____ Chapter.

4. I am a legal resident of and am registered to practice architecture in the United States. (Please attach evidence of current registration in one state and complete below.)

WASHINGTON

STATE

OCT. 21, 1970

DATE OF INITIAL REGISTRATION

STATE

DATE OF INITIAL REGISTRATION

5. I am or previously have been an AIA member. ☒ Yes ☐ No I was ☐ an Associate ☒ an AIA member. (Give prior membership information.)

SEATTLE

CHAPTER

DATES OF MEMBERSHIP

CHANGE OF ADDRESS/OVERSIGHT

REASON FOR MEMBERSHIP LAPSE

6. The AIA's affirmative action programs require that we identify women and federally defined minorities. Please check appropriate designation.

☐ White ☐ Black ☐ Hispanic ☐ Indian/Eskimo/Aleut ☐ Asian/Pacific Islander ☐ Female ☐ Other _____

7. Honorable standing in the profession and community is verified by the following sponsors, who are AIA members in good standing and who must be available for contact by the local chapter: (Sponsor signature not required if reinstating or advancing membership.)

NAME	PHONE	CHAPTER	SPONSOR SIGNATURE
_____	_____	_____	_____
_____	_____	_____	_____

8. I declare that the above information is accurate and complete. I understand that, as a member, I will be subject to the duties, obligations, and responsibilities set forth in the relevant portions of the AIA Bylaws, Rules of the Board, Code of Ethics and Professional Conduct, and policies of the Institute.

9. I enclose my check for the admission fee and the first year's annual dues, of which \$30 is for a one-year subscription to ARCHITECTURE magazine. I understand that if I am not admitted to membership the dues will be returned to me and the admission fee retained by the AIA as an administrative fee.

APPLICANT'S SIGNATURE

DATE

NEW MEMBERS: Mail this form to your local chapter with appropriate enclosures. See instructions on reverse side.

REINSTATING MEMBERS: Complete supplemental dues information on reverse side and forward to your local chapter.

FOR CHAPTER USE ONLY — The Executive Committee of the SEATTLE, WA Chapter/AIA has reviewed this application for accuracy and completeness and recommends this applicant for AIA membership. (If acceptance is not recommended, please attach a statement setting forth reasons why the applicant does not meet the qualifications set forth in the AIA Bylaws.)

AUTHORIZED CHAPTER SIGNATURE

DATE

CHAPTER MAILING INSTRUCTIONS: Send applications and national dues to 1970 Chain Bridge Rd., McLean, VA 22109-0569.

APPLICATION INSTRUCTIONS

1. Please print or type information to complete application.
2. Include required **sponsors' signatures**.
3. **Sign** the application.
4. Include a photocopy of your **current state registration**, reflecting expiration date.
5. **If you are a former member applying for readmission**, complete the section on supplemental dues; a worksheet is provided to assist you in figuring your national dues payment.
6. Attach a **check** for the correct amount of national dues/fees, as indicated at right, made payable to The American Institute of Architects.
7. Contact your local component to determine **local dues** and attach a separate check.
8. An authorized component signature is required; please **send your application to the secretary/executive of YOUR LOCAL COMPONENT**.

LOCAL COMPONENT CONTACT:

(If no address indicated, please check your telephone book for local listing or call AIA headquarters at: (202) 626-7392.)

(Place chapter stamp here)

MEMBERSHIP DUES:

FULL PAYMENT MUST ACCOMPANY ALL APPLICATIONS

NEW MEMBERS: \$150 (includes admission fee)

REINSTATING FORMER MEMBERS: \$175 (includes \$25 reinstatement fee) + supplemental dues (if owed)

Enter dues amount on line a. of dues worksheet below.

- Payments accompanying applications received by AIA headquarters between July 1 and September 15 will be credited in the amount of one-half regular (not supplemental) dues toward the following year.
- Payments accompanying complete applications received by AIA headquarters between October 1 and December 15 will cover annual dues through December of the following year.

NOTE:

Payments to The American Institute of Architects and to state and local components are *not* deductible as charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code.

AIA MEMBERSHIP

INTRODUCTION/CHAPTER ASSIGNMENT

AIA is a three-tiered membership organization whereupon the member is required to join the national, local, and state organizations. All members of the Institute shall be and remain members of the chapters and state organizations to which they are assigned or reassigned, and shall be obligated to pay dues to all three organizations. Information on local and state dues amounts can be obtained from the local chapter.

ELIGIBILITY

Every architect who is a legal resident of and has been granted a license or registration by any state, the District of Columbia, or any territory of the United States may apply for membership via the local AIA chapter serving the area in which the architect lives or works.

TITLE

Members in good standing may print and otherwise use in connection with their practice and work the initials "AIA" as a suffix to their names and the titles "Member of the American Institute of Architects" and "Member of the (assigned chapter or state organization) of the American Institute of Architects."

SUPPLEMENTAL DUES—REINSTATING FORMER MEMBERS MUST COMPLETE THIS PORTION.

(First-time members are not required to respond to supplemental dues until their second year of membership.)

Every member and former member reapplying who is an "owner or manager in an organization using registered architects to perform services for the public" is liable for supplemental dues. To satisfy this requirement, all former members **must check the appropriate designation below and include payment for the total amount of dues that applies.**

☐ I AM NOT LIABLE.

☐ I am an owner or manager in a firm that provides professional services. The responsibility for supplemental dues is being met by the AIA member whose name, firm, and membership number I have listed.

GERALD P. ADKINS
NAME

THE ADKINS GROUP
FIRM

3210
MEMBERSHIP NUMBER

☒ I am a sole proprietor with no registered architects working for me. I have enclosed \$70 supplemental dues in addition to the regular dues. (Insert \$70 for supplemental dues on line b. of worksheet below.)

☐ I am an owner or manager in a firm that provides professional services. Payment for supplemental dues for that firm is enclosed and calculated as follows:

1. Count the number of all Registered Architects employed, including yourself and any partners.

_____ × \$170 = _____

2. Count the number of AIA members (do not include Associate or Emeritus).

_____ × \$100 = _____ credit

3. Subtract figure reached in Step 2 from figure in Step 1.

\$ _____

This is your supplemental dues amount. Enter total on line b.

List below, or enclose listing of names and AIA membership numbers for each AIA member in firm whose supplemental dues obligation is fulfilled by this payment. To qualify for the member credit, a list of AIA members must be enclosed. (Use additional sheet if necessary.)

Member Name _____

No. _____

Member Name _____

No. _____

DUES WORKSHEET

a. Current Dues (includes admission fee)

PLUS

+

b. \$25 Reinstatement Fee (former members only)

PLUS

+

c. Supplemental Dues (if applicable)

EQUALS

=

d. TOTAL REMITTANCE

\$150

\$25

\$70

\$245.00

NY ALL APPLICATIONS
tion fee)
(includes \$25 reinstatement fee)
renewal dues (if owed)
worksheet below.
received by AIA headquarters between
ing year.
ed in the amount of one-half regular (not
ications received by...

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REMOVE BILLFOLD COPY FROM DISPLAY COPY

159 9.85

STATE OF WASHINGTON

REF # AD-KI-NG-P634B6

ARCHITECT

ADKINS, GERALD P.
318 1ST AVE S 608
SEATTLE

WA 98104

[Signature]

DIRECTOR

NUMBER

Expiration Date

208-00

0002167

01-26-89



September 8, 1988

Membership ID: 3210

Gerald P Adkins AIA
318 First Ave S #608
Seattle, WA 98104

Dear Mr. Adkins:

We are pleased to inform you that your membership in the American Institute of Architects has been restored.

You are assigned to the Seattle Chapter of the AIA effective this date, and the normal flow of regular AIA mailings will resume within eight weeks.

It is a pleasure to welcome you back to AIA membership. Your renewed interest and support are important to the over 50,000 architectural professionals who now comprise the AIA. I urge you to take an active part in your chapter's activities and the programs offered by the Institute, particularly in the areas of professional development, community action programs, and design issues.

Should you have any questions or if we can be of assistance in the future, please feel free to call upon us.

Sincerely yours,


Ted Pappas, FAIA
President

cc: Seattle Chapter, AIA
Washington Council AIA