

Applicant Information

Name _____

School/Company/Organization _____

Address _____

Phone _____ Fax _____

Email _____

citizenship _____

Education

School, Undergraduate Degree, Date and Major _____

School, Graduate Degree, Date and Major _____

School, Doctoral Degree, Date and Major _____

Membership Type

Dues include national and chapter for the first year; future dues will be billed on the anniversary date of your membership. Select the appropriate membership type below.

Regular: 1200 RMB/year Professional:2,800 RMB/year

Premium: 6,800 RMB/year Honorary: Dues Waived

Enterprise: 38,000 RMB/year Lifetime: Dues Waived

Type of Organization

Consultancy Corporation

Public Sector Educational Institution, at _____

Design Discipline

Check all that apply

Brand Identity Interior Design Communications

Marketing Corporation Identity Medical/Scientific Products

Environmental Design Package Design Graphic Design

Recruitment Industrial Design Research

Interaction Design Website Design Architectural Design

Landscape Design

Professional Interest Section

Communicative Environment Housewares Consumer Electronics

Human Interaction Design History Materials & Processes

Design Management Design Protection Design Research

Design Thinking Diversity Ecodesign

Packaging & Branding Furniture Product Development

Transportation Female Supplies Design Young Professionals

Semi-Automatic Ground Environment

How Can APDF Serve You Best?

Prof. Development events Networking Opportunities Career Opportunities

Put me in the loop Business Contact Professional & Education Support

Discounts to Awards & Conferences Other _____

How Did You Hear About APDF?

APDF Member APDF Parnter Institutes APDF Project Parnters

APDF Website Social Media other _____

Optional Demographics

APDF advocates equal opportunities on employment. The following optional information will help APDF better understand, serve the need of members and the professions.

Male Female

Date of Birth (yy/mm/dd) _____

Asian Caucasian European

African American Oceanian

Other _____

Payment

Please email the completed application form and scanning copy of payment at iai-ap@iai-ap.org.

Bank Transfer

Account _____

Account Number _____

All banking charges and taxes should be payed by applicants.if you remit in the name of company, you need to pay 3% of the tax to get invoice,or you can get voucher; if you remit in the name as an individual, you can only get voucher.

Application Certification:

I ensure that the above information is accurate and complete, and agree to abide by the rules and articles of APDF, meanwhile, by social morality.

Signature : _____

Date: _____