AIA Michigan

2016 Architecture Education Day

MICHIGAN ARCHITECTURAL FOUNDATION

Name: _____

Address: _____

City, State Zip _____

Select one: ◯ AIA Member ◯ Other

AIA Member #: _____

Phone: _____

Email: _____

☐ I will be attending the DMC Tour

☐ I will be attending the Open House

Important details

FREE to everyone

Remember you must bring your own hard hat for tour.