

## AIA San Diego Chapter ARE 4.0 Study Material Check-Out Request



AASD Member: Yes: Please provide AIASD member #  Firm Name:  Address:  City, State, Zip Code:  Day Phone:  Evening Phone:  Eve	Name (Please Print):  AIASD Member:							Please Select Exam Section Requested (limit one exam section per request):  KAPLAN A.L.S LEARNING SYSTEMS:		
	Yes: Please provide	AIASD	memb	er#					<u>_</u>	
City, State, Zip Code:    Evening Phone:	Firm Name:								(\$200 Deposit Required):	(\$200 Deposit Required):
City, State, Zip Code:  Day Phone:  Evening Phone:  Evening Phone:  Email:  First:  Email:  For OFFICE USE: (Do Not Pill Out Seation Below)  Check Out Fees:  Mentlor Non-Nember Check Out (2 Weeks): \$10 \$25 \$\$ Credit Card of Check Cash ToTAL DUE:  Signature  Email:  Authorized Signature  Signature  Signature  Signature  Signature  Building Systems  Signature  Si	Address:								·	
Fax	City, State, Zip Code:								_	
Fax:	Day Phone:					Evening Phone:			_	
Email:  FOR OFFICE USE: (Do Not Fill Out Section Below)  Check Out Fees:  Member Non Member Payment Method:  Check Out (2 Weeks): \$10 \$25 \$ Credit Card Check Cash Renewal (1 Week): \$5 \$10 \$2 \$ Credit Card # Type: Exp. Date:									Building Systems	Programming, Planning & Practice
Email:    Concision & Answer Book   Concision & Answer Book   Practice Vignettes   Pacifical Vignettes   Pacif	Fax:								(\$200 Deposit Required)	(\$200 Deposit Required):
FOR OFFICE USE: (Do Not Fill Out Section Below)  Check Out [2 Weeks]: \$10  \$2  \$  Credit Card									Study Guide	Study Guide
First Office USE: (Do Not Fill Out Section Below)  Check Out Fees:	Email:								Question & Answer Book	Question & Answer Book
Check Out Fees:									Practice Vignettes	Practice Vignettes
Check Out (2 Weeks): \$10 \$25 \$ Credit Card Check Cash Renewal (1 Week): \$5 \$10 \$ (Credit Card information required for deposit)  TOTAL DUE: \$ Credit Card #	FOR OFFICE USE: (Do Not File	l Out Se	ction Be	low)					Flash Cards	Flash Cards
Renewal (1 Week): \$5 \$10 \$ Credit Card information required for deposit)  TOTAL DUE: \$ Credit Card # (\$200 Deposit Required)  Type:Exp. Date:Study Guide	Check Out Fees:	1	Member	Non-Me	ember	Payment Method:				
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Type: Exp. Date:	Renewal (1 Week):		\$5	\$10	\$	Credit Card information	required for deposit	)	Structural Systems	Schematic Design
Billing Address:  Late/Damage Fees:  Late Fees: \$ 5.00 x days \$ Signature  Damages: \$ 0.50 x pages \$ Total Charged  Important Dates:  Date Out Date Due Renewal Date New Due Date Date: Date Due Date Date: Date Due	TOTAL DUE:				\$	Credit Card #			(\$200 Deposit Required)	(\$200 Deposit Required)
Billing Address:  Late/Damage Fees:  Late Fees: \$ 5.00 x days \$ Signature  Damages: \$ 0.50 x pages \$ Total Charged  Important Dates:  Date Out Date Due Renewal Date New Due Date New Due Date New Due Date  Thave read the "ARE Study Material Check-out Policy" and reviewed the above information. I understand that I will be charged any and all fees as stated above should I fail to comply with this information. Failure to me these dates and times will result in late and replacement fees being charged as noted on this form.  Billing Address:  Practice Vignettes Practice Vignettes Plash Cards  Site Planning & Design (\$200 Deposit Required) Study Guide Question & Answer Book Practice Vignettes Plash Cards  Practice Vignettes Plash Cards  Plash Cards  Date:  Date:  Date:						Type:	Exp. Date:		Study Guide	Study Guide
Late Fees: \$ 5.00 x days \$ Signature  Damages: \$ 0.50 x pages \$ Total Charged  Important Dates:  Date Out Date Due Renewal Date New Due Date New Due Date Replacement Fee \$ 200.00 charged if not returned by:  I have read the "ARE Study Material Check-out Policy" and reviewed the above information. I understand that I will be charged any and all fees as stated above should I fail to comply with this information. Failure to me these dates and times will result in late and replacement fees being charged as noted on this form.  Signature  Flash Cards  Site Planning & Design (\$200 Deposit Required) Study Guide Question & Answer Book Practice Vignettes Flash Cards  Flash Cards  Date:  Date:						Billing Address:			Question & Answer Book	Practice Vignettes
Damages: \$ 0.50 x pages \$  TOTAL: \$ Total Charged    Important Dates:  Date Out  Date Due  Renewal Date  New Due Date  Replacement Fee \$ 200.00 charged if not returned by:  Diate of these dates and times will result in late and replacement fees being charged as noted on this form.  Signature  Site Planning & Design  (\$200 Deposit Required)  Study Guide  Question & Answer Book  Practice Vignettes  Flash Cards  Flash Cards  Date:  Date:	Late/Damage Fees:					· ·			Practice Vignettes	
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Date Due by 5:00 PM by 10:00 AM Question & Answer Book Renewal Date by phone by e-mail Practice Vignettes New Due Date by 5:00 PM by 10:00 AM Practice Vignettes Replacement Fee \$ 200.00 charged if not returned by:  I have read the "ARE Study Material Check-out Policy" and reviewed the above information. I understand that I will be charged any and all fees as stated above should I fail to comply with this information. Failure to me these dates and times will result in late and replacement fees being charged as noted on this form.  Signature  Date:	· ·								Study Guide	
Renewal Date by phone by e-mail Practice Vignettes  New Due Date by 5:00 PM by 10:00 AM  Replacement Fee \$ 200.00 charged if not returned by:  I have read the "ARE Study Material Check-out Policy" and reviewed the above information. I understand that I will be charged any and all fees as stated above should I fail to comply with this information. Failure to me these dates and times will result in late and replacement fees being charged as noted on this form.  Signature  Date:						- by 5:00 PM	by 10:00	ΔΜ	Question & Answer Book	
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	Signature			•		•				Date:
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Please sign and return this form via fax or e-mail to the AIA San Diego office at (619) 232-4542 or info@aiasandiego.org. Materials may be picked up & returned in person to AIA San Diego, 233 A Street, Suite 200, San Diego. If you have any questions, please contact AIA San Diego at (619) 232-0109.