



# Application for International Associate Membership

Full payment must accompany application.

(Please print clearly – incomplete information will delay application process)

## 1. Member information

First name/middle initial \_\_\_\_\_  
 Last name \_\_\_\_\_  
 Email address \_\_\_\_\_  
 Birth date (MM/DD/YY) \_\_\_\_\_ Gender  Male  Female  
 Home address \_\_\_\_\_ Apt. \_\_\_\_\_  
 City/state/ZIP \_\_\_\_\_  
 Home phone number \_\_\_\_\_

## 2. Eligibility requirements (check all boxes that apply)

I attest that I hold a valid non-U.S. accounting credential from a professional organization, government entity or similar accountancy body approved by the AICPA Board of Directors (listed under Section 7).

I attest that I meet either the CPE requirement for a CPA or its equivalent in my home country.

I attest the information provided is accurate and agree this information may be audited by the AICPA and that inaccurate information may result in the loss of membership.

I attest that I meet the AICPA's membership rules and eligibility requirements outlined on [aicpa.org/membership](http://aicpa.org/membership). I agree to abide by the decisions of the Board of Directors as to the disposition of this application. I attest that I have read the AICPA and CPA.com Joint Privacy Policy outlined on [aicpa.org/PrivacyandTerms](http://aicpa.org/PrivacyandTerms). If admitted as an International Associate Member, I agree to be governed by and to comply with the Bylaws and Code of Professional Conduct of the Institute, including requirements for Continuing Professional Education (CPE).

→ Signature \_\_\_\_\_ Date \_\_\_\_\_

## 3. Employment information

Business name \_\_\_\_\_  
 Business address \_\_\_\_\_  
 Suite/floor number \_\_\_\_\_  
 City/state/ZIP \_\_\_\_\_  
 Work email address \_\_\_\_\_  
 Work phone number \_\_\_\_\_  
 Work fax number \_\_\_\_\_

Please indicate preferred mailing address  Business  Home

Please indicate preferred email address  Business  Home

## 4. Membership information

Have you ever been a member of the AICPA?  No  Yes  
 Member number \_\_\_\_\_

## 5. Ethnicity (optional)

Asian  Hispanic/Latino  Pacific Islander  
 Black/African Descent  Middle Eastern  White/Caucasian  
 East Indian  Native American  Other

<b>Mailing instructions</b> <b>Mail completed form to:</b> AICPA (Payment – Subscriptions) PO Box 37049 Boone, IA 50037-0048 USA	<b>Need help?</b> 888.777.7077 (U.S.) +1.919.402.4500 (International) M–F 9am–6pm ET service@aicpa.org aicpa.org
---	---

## 6. Annual membership dues (check one box)

**Join month**

January ..... \$253.75  
 February ..... \$217.50  
 March ..... \$181.25  
 April ..... \$145.00  
 May ..... \$435.00  
 June ..... \$435.00  
 July ..... \$435.00  
 August ..... \$435.00  
 September ..... \$398.75  
 October ..... \$362.50  
 November ..... \$326.25  
 December ..... \$290.00

**Note:** If you have temporarily left the workforce (TLW), please contact Member Service. See contact information below.  
 TLW status must be confirmed annually with Member Service to maintain dues rate.

**AICPA International Associate membership is available only to full, regular members of the organizations listed below. To qualify, please check the organization(s) you belong to:**

- Australia – Institute of Chartered Accountants in Australia (ICAA)
- Canada – Chartered Professional Accountants Canada (CPA)
- England & Wales – Institute of Chartered Accountants in England and Wales (ICAEW)
- Germany – Institut der Wirtschaftsprüfer in Deutschland e.V. (IDW)
- Hong Kong – Hong Kong Institute of Certified Public Accountants (HKICPA)
- Ireland – Chartered Accountants Ireland (CAI)
- Japan – Japanese Institute of Certified Public Accountants (JICPA)
- Mexico – Instituto Mexicano de Contadores Publicos (IMCP)
- New Zealand – New Zealand Institute of Chartered Accountants (NZICA)
- Scotland – Institute of Chartered Accountants of Scotland (ICAS)
- South Africa – South African Institute of Chartered Accountants (SAICA)

## 7. Specialized interest sections (voluntary)

FVS Forensic and Valuation Services ..... \$99 ... Waived  
 NFP Not-for-Profit ..... \$99 ... Waived  
 PFP Personal Financial Planning ..... \$99 ... Waived  
 TX Tax ..... \$99 ... Waived

## 8. Enrollment fee

Enrollment fee ..... \$65

## 9. Payment information promotional code \_\_\_\_\_

**Note:** In order to activate your membership, please ensure that your payment includes applicable fees from sections 6, 7 and 8.

My check for US\$ \_\_\_\_\_ payable to the AICPA is enclosed.  
 OR please bill my credit card  AMEX  Discover  MasterCard  Visa  
 Cardholder name \_\_\_\_\_  
 Card number \_\_\_\_\_  
 Exp. date \_\_\_\_\_ (MM/YY)  Business card  Personal card  
 Amount US\$ \_\_\_\_\_  
 → Signature \_\_\_\_\_

Our membership year runs Aug. 1 through July 31. Your initial dues will be prorated based on the month you join. Renewal payments are due each year by July 31 and the first renewal notice is sent in June. If you joined in May, June, July or August, you will not be billed for your first renewal until June the following year.