



Request Form

For Mailing Addresses

***Instructions:** Please submit this completed form and required fee to the Alabama Board for Registration of Architects office at RSA Union; Suite 390; 100 North Union Street; Montgomery, Alabama 36130-4450.*

Requestors Name: _____

Address: _____

City, State, Zip Code: _____

E-mail address: _____

Phone: _____

Purpose of Request:

Please indicate from the list below the type of data and preferred form you are requesting (choose one):

- Mailing Labels for Licensed Architects
- Mailing List on Electronic Media for Licensed Architects
- Mailing Labels for Interns
- Mailing List on Electronic Media for Interns

I have enclosed the required \$25 fee in the form of a check, cashier's check, corporate or business check, money order, or personal check [Admin. Code 100-X-1-.14] made payable to the Alabama Board for Registration of Architects.

Signature: _____ Date: _____