



TRADE MEMBERSHIP APPLICATION

COMPANY _____

BUSINESS ADDRESS

Street _____

City _____

State/ Province _____

Zip/Postal Code _____

Country _____

Website _____

CONTACT INFORMATION

First Name _____

Last Name _____

Title _____

Phone _____

Fax _____

Email _____

☐ Check here if you would like to receive our quarterly newsletter

PRIMARY BUSINESS DESCRIPTION

☐ Interior Designer

☐ Interior Decorator

☐ Home Stager

☐ General Contractor

☐ Architect

BUSINESS DOCUMENT

Please attach at least **one** of the following:

- Valid membership to a major design organization (ARIDO, OAA, IDC, ASID, IIDA, AIA)
- Interior Design Certification (NCIDQ, CCIDC)
- Valid Business Number of an Interior Design, Architect or Home Contractor Business

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