



conejo association of professional interior designers

INDUSTRY PARTNER APPLICATION

Thank you for your interest in CAPID (Conejo Association of Professional Interior Designers), a unique, local business network that connects emerging professionals, established professionals and relevant businesses in the interior design field.

Applicant Name:

Appellation(s):

Business Name:

Business Website:

Primary Email:

(email address for CAPID communication including meeting invitations.)

Business Email:

(if different from Primary Email.)

Business Address:

Business Phone:

Mobile Phone:

(if different from Business phone.)

Home Address:

Specialties:

of Years in Business

CAPID Sponsor

Your CAPID Sponsor will have the responsibility of furnishing a Letter of Recommendation. This letter must be submitted with your application.



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Briefly describe the products/services you offer to the interior design industry:

Please describe your trade program if you have one:

Requirements and Obligations of Industry Partner Membership:

Required for Industry Partner Membership:

- Be a vendor or producer of goods and services utilized by members of the interior design industry.
- Must have been working in the industry for a minimum of (3) three years.
- Must live or work within the CAPID boundaries: Calabasas, Agoura Hills, Thousand Oaks, Westlake Village, Simi Valley, Newbury Park, Moorpark, and Camarillo.
- Must be sponsored by a Designer Member of CAPID.
- Upon acceptance the new member will need to remit the annual dues of \$300.00. (Dues are prorated based on acceptance date.)
- To attend a minimum of 6 meetings per year. You may send an employee as proxy to a maximum of 4 meetings per year.
- To complete 0.1 Continuing Education Unit in Interior Design per year.
- To understand that you will be on provisional status for one year.
- To understand that you may not hold the offices of President or Vice President.
- To understand that you cannot use CAPID meetings as an open forum for product line promotion unless you are invited to make a formal presentation to the members.

The CAPID Board and the Membership Committee will review your application and contact you regarding your pending membership. Please be aware this process may take several weeks. Please do not attend any monthly meetings until you have received notification of your acceptance.



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I have read and understand the membership requirements and obligations. I attest to the accuracy of the information given in this application and am prepared to verify as needed. If accepted, I agree to abide by CAPID's by-laws and requirements. I will work toward maintaining and enhancing the prestige of the interior design profession.

Signature: _____
Insert your digital signature or type your name.

Date: _____

To submit with this application:

- ☐ Letter of Recommendation for your CAPID Sponsor
- ☐ Your CV or resume detailing your industry experience
- ☐ Copy of your business card or your business email signature

Please email the completed application package

Christine Bullard (cbullard@calclosets.com)

Membership Chair