

conejo association of professional interior designers

INTERIOR DESIGNER 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



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Please select one (1) of the following:

- Employed or self-employed for three (3) or more years working as an Interior A Designer
 - A degree in Interior Design from an accredited school and at least one (1) year work experience as an interior designer, PLUS
 - 1) Professional affiliation/certification with ASID, NKBA, NCIDQ, CID, IDS, IIDA, **or**
 - 2) Three (3) of the following:
 - a. Resale Tax ID Current CA State Sellers Permit #.
 - b. 4 Trade Vendor References Company name, Contact name and phone,
 - c. Business License,
 - d. Business Website,
- Employed by a Design company or store for 6 or more years as an Interior C Designer.

Please share your social media accounts associated with your business: (optional)

Facebook

Instagram

LinkedIn

Other

Requirements and Obligations of Interior Designer Membership:

- Must live or work within the CAPID boundaries: Calabasas, Agoura Hills, Thousand Oaks, Westlake Village, Simi Valley, Newbury Park, Moorpark, and Camarillo.
- 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.
- To complete 0.1 Continuing Education Unit in Interior Design per year.
- To understand that you will be on provisional status for one year.

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:		Date:	
_	Insert your digital signature or type your name.		

To submit with this application:

- □ Your CV or resume detailing your industry experience.
- □ Proofs of your education and professional certifications (if applicable)
- □ Required documents if you selected **B-2** in the chart above.
- □ Copy of your business card or your business email signature

Please email the completed application package Christine Bullard (cbullard@calclosets.com)
Membership Chair