Design Trade Program Application

INFORMATION	
Name	
Name of Firm	
Business Address	
City/State/ZIP Code	
Business Phone	
Email	
Please provide: a) a business card indicating the applisting the applicant's name; and either b) a copy of yc the name of the professional design association to w	our Business License or Resale Certificate; or c)
Business License Number or Resale Certificate Num	nber (circle which one you are providing)
Professional Design Association/Membership Numb	per
To initiate enrollment in the Design Trade Program, plea Submit documents to a store associate, email designt a Design Trade Specialist at 630.527.1516. Applicant's read, understood and fully accept and agree to the te Letter of Agreement. All documentation must be revie prior to enrollment in the Design Trade Program.	tradeprogramus@crateandbarrel.com or fax to s signature serves as confirmation that you have rms and conditions set forth in the accompanying
Applicant's Signature	Date
The Company reserves the right to change, expand, on which the Design Trade Program is conducted a to terminate such program and/or discount at any tir cancellation may occur at the sole discretion of the Carade Program member.	nd/or the attendant discount is provided, and me. Such changes, expansion, contraction or
FOR OFFICE USE ONLY	
☐ Copy of Business Card/Website Address	☐ Design Trade Program ID Card Issued
☐ Copy of Business License or Resale Certificate	#
☐ Copy of Professional ID/Membership Info	☐ Copy of Letter of Agreement to Designer
Associate Name	Date
Associate: Please file once completed	