## Designer Rewards Program Application

INFORMATION	
Name	
Designer ID #	
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 you 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	er
To initiate enrollment in the Designer Rewards Progr. documentation. Submit documents to a store associa or fax to a Designer Rewards Specialist at 630.527.11 that you have read, understood and fully accept and the accompanying Letter of Agreement. All documents Company representative prior to enrollment in the Designer Rewards Programment	ate, email designerrewardsus@crateandbarrel.com 516. Designer's signature serves as confirmation agree to the terms and conditions set forth in ntation must be reviewed and approved by a
Designer's Signature	Date
The Company reserves the right to change, expand, on which the Designer Rewards Program is conduct and to terminate such program and/or discount at a or cancellation may occur at the sole discretion of the Designer Rewards member.	contract or cancel any terms and conditions ted and/or the attendant discount is provided, ny time. Such changes, expansion, contraction
FOR OFFICE USE ONLY	
☐ Copy of Business Card/Website Address	☐ Designer Rewards ID Card Issued
☐ Copy of Business License or Resale Certificate	☐ Copy of Letter of Agreement to Designer
☐ Copy of Professional ID/Membership Info	
Associate Name	Date
Associate: Please file once completed.	