

# **2017 DESIGNER PORTFOLIO PROGRAM APPLICATION**



Denver**Design**District

**Membership Application for 2017**

**Accepting Members: On-going**

**Fee: \$300**

**Note: Applicants must be a design principal of the firm.**

*Please print clearly or type.*

Designer Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suite: \_\_\_\_\_

City \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone : \_\_\_\_\_

FAX : \_\_\_\_\_

Cell : \_\_\_\_\_

E-Mail: \_\_\_\_\_

\*Website: \_\_\_\_\_

**\*Note: You will be asked to provide professional images and a headshot once you are accepted into the program.**

## **DESIGN PROFILE**

A. **PERSONAL PROFILE** (Attach additional sheets if needed)

Years Experience: \_\_\_\_\_

\_\_\_\_\_

Education/Degrees: \_\_\_\_\_

Sales Tax License # \_\_\_\_\_

Affiliations: \_\_\_\_\_

Awards/Published Articles: \_\_\_\_\_

Other: \_\_\_\_\_

B. **INDUSTRY:**

Interior Design       Architecture

C. **SERVICES:**

Do you offer Design Services?     Yes     No

Buying Services/Shopping?       Yes     No

D. **DESIGN EXPERIENCE:** Please check the appropriate category(s) **4 max.**

**You must be experienced in the specialties you list.**

Residential     Commercial /Contract/Office     Government / Institutional

Hospitality/Restaurant     Health Care/Medical     Remodel

New Construction

**Specialties: 4 max.**

- Space Planning and/or CAD  Kitchen/Bath  Architectural Plans
- Project Management  Paint/Color Consulting  Landscaping  Window Coverings
- Flooring

**Preferred Style(s) of Design: 3 max.**

- Contemporary Modern/Minimalist  Traditional/ European/ Period Design
- Eclectic  Transitional  Mountain/Western

**Preferred Location:** Please list the area or areas that you currently serve. **Limit 4.**

- Denver Metro  Colorado Springs  Boulder  Genesee/Evergreen/Golden
- Ft. Collins/Greeley  Aspen/Basalt/Grand Junction  Vail/Beaver Creek/Edwards/Avon
- Steamboat Springs  Breckenridge/Silverthorne  Telluride/Durango
- Jackson Hole/Wyoming  Santa Fe/Taos
- Montana  Utah/Park City

C. Do you have business insurance?  Yes  No  
**(Include copy with application – if you do not have insurance you may still apply as long as you agree to purchase if selected)**

D. Do you have a client contract or Letter of Agreement?  Yes  No  
**(Copy must be included with application)**

E. Do you have a portfolio/brochure/presentation photos?  Yes  No  
You will need to provide images and a headshot once accepted into the program.

Are your photos done by a professional photographer? **(This is mandatory)**  Yes  No

F. Do you have a retail business associated with your design business or are you employed by a retail store?  
 If yes, please expand  Yes  No

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G. Do you represent a manufacturers line where you may sell product direct to the client?  Yes  No  
 If yes, please expand.

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**L. REFERENCES:**

You must have references from at least **three** showrooms in the Denver Design District. **Please list at least three DDD showrooms below from which you have purchased merchandise in the last year.**

You may list more than three.

Showroom Name: \_\_\_\_\_ Showroom Name: \_\_\_\_\_

Showroom Name: \_\_\_\_\_ Showroom Name: \_\_\_\_\_

Showroom Name: \_\_\_\_\_ Showroom Name: \_\_\_\_\_

**If selected, do you agree to the following criteria (required):**

1. Participate in an on-duty day at the DDD from 10:00am to 4:00pm M-F? (approx. 10-12 days/year)\*  
\*Out of state designers, and designers located 70 miles or more from the DDD, are not required to participate.  
*No call, no shows may be cause for termination from the program* Y N
2. Agree to a fee structure for any off the floor purchases made through the buying service? Y N
3. Offer a complimentary one-hour meeting with clients while on duty and any clients that find you through this program? Y N
4. Carry a cell phone while on duty (provided by DDD)? Y N
5. Understand that the purpose of the program is to increase exposure and sales at the DDD and designers must focus their efforts towards purchases of products found at the DDD? Y N
6. Agree to pay the yearly fee associated with the program? Y N
7. Agree to attend (at minimum) one set of Showroom Tours within the calendar year? Y N
8. Agree to report all Designer Portfolio client sales to the DDD at the end of the calendar year or date requested. Y N
9. Agree not to publicly endorse another design center/resource for designers? Y N
10. Maintain a current DDD membership for the year in which you are applying? Y N

\*The DDD reserves the right to change the policies and/or procedures regarding the Designer Portfolio program at any time.

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**Signed**

**Date**

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**After you have completed this form, please return it to a reception desk at the Denver Design District, email or mail it to the Denver Design District (Attn: Jo Mabary, 595 S. Broadway, Suite 200, Denver, CO 80209); Phone- 303.282.3234 Fax- 866.846.2032 or Email- [jo@denverdesign.com](mailto:jo@denverdesign.com)**

**The final selection of members will be made by the showrooms from the list of designers meeting the criteria and you will be notified upon approval.**