



APPLICATION

Name Appellation(s)

ASID Member # USGBC Member # Other organization(s)

Company Title

Address City | State | Zip

Phone (work) Alt. Phone (optional)

E-mail Website (optional)

How did you hear about REGREEN?

Colleague: Website: Publication: Event:

Professional Role(s) – designate up to 3

Architect Builder Consultant Contractor
 Design Educator Developer Interior Designer Manufacturer/Supplier
 Property Manager Realtor Remodeler Other:

PAYMENT INFORMATION

Application fee is \$60 Visa MasterCard American Express Check

Card number

Expiration date

Security code

Thank you for enrolling in the REGREEN Trained education program.

Email completed application to **regreen@asid.org**. If remitting payment by check, make check payable to *American Society of Interior Designers* and mail to:
ASID | Attn: REGREEN Program | 608 Massachusetts Avenue, NE | Washington, DC 20002-6006.

Questions? Contact 202-675-4440 or regreen@asid.org.