

# H E N R E D O N & S C H O E N E R

Design. Build. Furnish.

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## "To the Trade" enrollment application for Interior Designers

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

Company Name: \_\_\_\_\_

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

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

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

Email: \_\_\_\_\_

Resale # \_\_\_\_\_

Tax ID # \_\_\_\_\_

Current or previous relationship with a Henredon & Schoener Employee? \_\_\_\_\_

If yes, please list Employee's name? \_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*Please include a copy of your Resale Certificate or Reseller's Permit issued by the Department of Revenue (effective January 1, 2010) and business card

\*Please fax or email your completed application to Matt Schoener at 425.451.4143 or [matt@henredonschoener.com](mailto:matt@henredonschoener.com)