2027

PROFESSIONAL MEMBERSHIP RENEWAL FORM

Please check the type of membership renewal requested
(This form is NOT for Industry Partners)

o $75 Professional Membership o $50 Associate Membership o $0.00 Student Membership

DUE DATE: DECEMBER 15, 2026*

Please make checks payable to DSID and mail with completed form to:

DSID Membership Coordinator
P.O. Box 750981
Centerville, OH 45475

List the information below as you would like it to appear:

Name:_____
Firm:_____
Address**_____
City/State/Zip:_____
Phone:_____
Cell:_____For Professional/Associate Members: Cell listed on website? **Yes or No**
E-mail Address:_____
Website:_____

Check here if there are no changes from what is currently on website: _____

We are also offering our membership the option to make an additional donation to help support our **Memorial Scholarship Award**. If you would like to contribute, please note the amount here and include with your dues check. $_____.

*To ensure your name is included on the 2027 Membership List and Website (for professional members), please return this Membership Renewal Form and Annual Dues before **December 15, 2026.** If you have any questions, please contact Marlene at 937.371.2226 or meorendorf@sbcglobal.net

Students: Please fill out a new form each year to remain on the membership list. Your Membership costs is complimentary. Please find your application on the DSID website https://www.daytoninteriordesigners.com/Applications/applications.php

**If you would like your mailings sent to an alternative address, please indicate that address as well.

Thank you for submitting your dues promptly and we welcome you to DSID