



American Academy of Healthcare Interior Designers

Industry Partner Application Form

“The Single Source for Healthcare Interior Design”
www.aahid.org

Industry Partner Information

Contact Name:	
Company Name:	
Billing address:	
City, State, ZIP Code:	
Telephone:	
Fax:	
E-Mail:	

Level of Commitment

- Platinum \$11,000 Silver \$5,500
 Gold \$8,250 Bronze \$2,750

Billing

Make checks payable to American Academy of Healthcare Interior Designers (AAHID).

- Check Credit Card

Credit card number:	
Expiration date:	
Authorized signature:	

Contact

Kathryn Checea, AAHID Director of Professional Relations
847/375-4765. kchecea@aaheed.org

Please return this form with your checks, and/or other gifts payable to:

American Academy of Healthcare Interior Designers
8735 W. Higgins Rd., Suite 300
Chicago, IL 60631

Statement

Please include a narrative that supports how you satisfy the requirements for becoming an Industry Partner for review by the AAHID Board. Attach the statement to this application when submitted.

Requirements for Industry Partners

- Industry Partners must have strategic alignment with the AAHID mission and values.
- Industry Partners have a documented history in healthcare product /research, development and sales no less than five (5) years that align with the AAHID service, mission, and values.
- Industry Partners have sales representatives trained and focused on sales and service of healthcare designers, architects and facilities.
- Industry Partners has an active marketing program directed toward Healthcare Industry.
- AAHID values an ongoing relationship; Industry Partners will assume financial responsibility for one of the Levels of Commitment.
- Industry Partners actively promote AAHID to architects, designers, hospitals senior living centers, and the healthcare industry at large.
- Industry Partners have the ability to connect to AAHID on your organizational website as an Industry Partner.

Website and Publication Information

Please supply in electronic format to kchecea@aahid.org

- Logo
- Product or Project Photography with identification
- Copy for web site
- URL link to your web site

Disclaimer

I understand that this application will be reviewed by AAHID to ensure that this will be a mutually beneficial relationship. Once approved, a contractual agreement will be presented in order to outline the behavior and expectations of both parties.

E-Signature(s): _____

Date: _____

Thank you for your support of the American Academy of Healthcare Interior Designers.

Industry Partner Application Continued

Please complete the additional information to help facilitate AAHID in meeting your needs as an AAHID Industry Partner.

Industry Activities

The trade shows you will attend this year are (name and location):

Other Information

Please select ways that your firm would like to participate with AAHID:

- | | | |
|--|---|--|
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> White Papers | <input type="checkbox"/> Scholarships |
| <input type="checkbox"/> Sales Support | <input type="checkbox"/> Healthcare Design Training | <input type="checkbox"/> Event Sponsorship |
| <input type="checkbox"/> Site Visit | <input type="checkbox"/> Roundtable | <input type="checkbox"/> Other _____ |

Please indicate if you are interesting in working with AAHID to promote the following:

- | | |
|---|---|
| <input type="checkbox"/> Product Research | <input type="checkbox"/> Education & Training |
| <input type="checkbox"/> Scholarships | <input type="checkbox"/> Graduate Studies |
| <input type="checkbox"/> Networking opportunities | <input type="checkbox"/> White Papers |

Do you have any special events or anniversaries in the coming year that we should know about?

What do you perceive are some of your biggest challenges or opportunities for the coming year?

Are there any additional ways that AAHID can help you make a positive impact on this industry?

Are your Public Relations and Marketing teams aware of AAHID and will they inform us of any product releases or announcement relevant to our constituency?

In what ways do you inform people about AAHID and how can we help you promote AAHID?

Other Comments

Thank you submitting your applications. Please continue to provide us information on how we can better meet your needs as an AAHID Industry Partner.

Kathy Checea, AAHID Director of Professional Relations, 847/375-4765, kchecea@aahid.org