



## **OWNERSHIP FORM**

**PLEASE EMAIL ATTACHMENT TO:**

**FIRST NAME:** \_\_\_\_\_ **LAST NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**HOW DID YOU HEAR ABOUT US?:** \_\_\_\_\_

**PLEASE BRIEFLY DESCRIBE YOUR BUSINESS HISTORY:** \_\_\_\_\_

**CURRENT OCCUPATION:** \_\_\_\_\_ **NET WORTH:** \_\_\_\_\_

**HOW MUCH LIQUID CAPITAL ARE YOU ABLE TO INVEST IN A FRANCHISE?:** \_\_\_\_\_

**WHERE ARE YOU WANTING TO OPEN A FRANCHISE?:** \_\_\_\_\_

**WHEN SOON WOULD YOU LIKE TO OPEN A FRANCHISE?:** \_\_\_\_\_

**ADDITIONAL INFORMATION:**