



## CONFIDENTIAL FRANCHISE APPLICATION

Thank you for your interest in Johnny Greeko's. To properly evaluate your application, please provide all necessary information, sign and return the completed application. Should your discovery evolve to a franchise award, please note that we may require copies of supporting financial documentation. All information will be treated as confidential and does not obligate either party.

### Personal Information

*(Please Print)*

Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

How long at this address? \_\_\_\_\_ Do you: Own ☐ Rent ☐ Other ☐

Tel: \_\_\_\_\_ Residence: \_\_\_\_\_ Business: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Best time to phone: (Residence) \_\_\_\_\_ AM / PM (Business) \_\_\_\_\_ AM / PM

Are you a citizen of Canada? Yes ☐ No ☐ If not, what country? \_\_\_\_\_

Residency Status: Landed Immigrant \_\_\_\_\_ Canadian Resident \_\_\_\_\_

Do you hold a valid Driver's Licence? Yes ☐ No ☐

What language(s) do you speak fluently? \_\_\_\_\_

Name of spouse: \_\_\_\_\_  
(Last) (First) (Middle)

Number of Dependents: \_\_\_\_\_ Ages of Dependents: \_\_\_\_\_

Will your spouse be involved in the business? Yes ☐ No ☐

## Employment History

Business Employment for the past five (5) years commencing with the most recent position:

Employer	Position	Employed From	Responsibilities	Most Recent Annual Income

## Education

Name of Institution	City/Country	Degrees/Diplomas Obtained

Describe any training received within the hospitality segment, sales or management?

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## General Information

How did you hear about franchise opportunities with Johnny Greeko's?

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Have you ever owned your own business / a franchise? If so, please describe.

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What are your reasons for going into business for yourself?

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List the characteristics that best describe you:

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What are your hobbies, community activities, or special interests?

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## General Information *(continued)*

What would you do to make your business successful?

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What does the term “**franchising**” mean to you? How would you describe the roles of the franchisor and the franchisee?

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Who will be responsible for the daily operation of your business? \_\_\_\_\_

How many hours per week are you willing to devote to your business? \_\_\_\_\_

Will you have a business partner(s)? Yes ☐ No ☐

Name of partner(s) \_\_\_\_\_  
*(each business partner must complete and submit a separate Application Form)*

Partner's involvement: *(please circle)* Full-time Part-time Investment Only

Market of Interest *(city names)*:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

When would you be ready to invest in your franchise? \_\_\_\_\_

References *(references will **not** be called without your prior consent)*:

1. \_\_\_\_\_ Telephone Number: \_\_\_\_\_
2. \_\_\_\_\_ Telephone Number: \_\_\_\_\_

## FINANCIAL INFORMATION

Have you ever filed for bankruptcy protection? Yes ☐ No ☐ When

Do you have a current copy of your credit report? Yes ☐ No ☐

## PERSONAL NET WORTH STATEMENT

ASSETS	\$	LIABILITIES	\$
Cash on Hand and in Banks		Bank Loan(s) Payable	
Marketable Securities <i>(not including R. R.S.P.)</i> – Present Market Value		Credit Card(s) Payable	
Accounts and Loans Receivable		Loan(s) payable to Friends and Relatives	
Real Estate – Primary Residence <i>(Present Market Value)</i>		Mortgage – Primary Residence	
Real Estate – Other <i>(Present Market Value)</i>		Mortgage – Other	
Life Insurance – Cash Surrender Value		Loan(s) against Life Insurance	
Automobile(s) <i>(registered in own name)</i>		Income Tax Payable	
R.R.S.P.		Other Liabilities <i>(Itemize)</i>	
Net Value of Business Interests			
Other Assets <i>(Itemize)</i>			
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES</b>	
		<b>TOTAL NET WORTH</b> <i>(Total Assets minus Total Liabilities)</i>	

**Liquid Capital to Invest In Franchise:** \_\_\_\_\_

**Source(s) of Liquid Capital:** \_\_\_\_\_

*I understand that the submission of this Application does not obligate me or Johnny Greekos Franchising Inc. (hereinafter referred to as "Johnny Greekos") in any manner, nor does it imply that there is any legal or commercial relationship between us. I further understand that Johnny Greekos has the sole right to approve or disapprove the Application for any reason it may determine and in the event that Johnny Greekos disapproves the Application, Johnny Greekos shall have no liability or ongoing obligations to me.*

*I certify that the information contained in this Application is accurate and complete. Johnny Greekos is authorized to investigate my background as it pertains to my qualifications. I further authorize Johnny Greekos to obtain a credit report and obtain any other information about my credit history as it deems necessary to evaluate my suitability as a potential franchisee.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Please e-mail your completed application to Debbie Daniel at:* \_\_\_\_\_