

THIS IS CONFIDENTIAL INFORMATION
This application does not oblige either party in any manner. Please print or type clearly and complete in full.
THIS IS NOT A CONTRACT
SECTION 1 – Personal Information

Last Name		First Name		Middle	<input type="checkbox"/> Male <input type="checkbox"/> Female		Citizenship		
Home Street Address							How many years at this address?		
City			State / Province		Zip / Postal Code		Country		
Previous Address (applicable only if change of address was in the past two years)							Birth Date (dd/mm/yyyy) / /19		
Home Phone ()		Cell ()		Other ()		Email Address:			
Marital Status		Name of Spouse		Spouse's Birth Date / /19		Spouse's Citizenship		No. of Dependant Children: Ages of children: 1. 2. 3. 4.	
If you are not a citizen of CANADA, are you legally entitled to reside and/or work in Canada?									
Main applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:									
Spouse: <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:									
How did you learn about Barmetrix?				Magazines and Trade Journals you read:					
How long have you been seeking to own your own business?			Do you plan to operate this business personally on a full-time level?			<input type="checkbox"/> Yes <input type="checkbox"/> No		What other businesses are you currently researching?	

SECTION 2 - Education

Type of School	Name of School	Location of School	Major Subjects	Graduate	Last Year Attended
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:				<input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 3 – Work Experience

Present Employer			Title:		Name of Supervisor:	
Street Address		Hours Worked Per Week:	Date Started: (mm/yyyy) / /		Salary Per Annum:	
City		State / Province	Zip / Postal Code	Business Phone ()		May we call you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No
Brief description of your role/responsibilities:						

Previous Employer			Title:		Name of Supervisor:	
Street Address		Hours Worked Per Week:	Date Started: (mm/yyyy) / /		Date Ended: (mm/yyyy) / /	
City		State / Province	Zip / Postal Code	Starting Salary:		Ending Salary:
Brief description of your role/responsibilities:				Reason for leaving:		

Previous Employer		Title:	Name of Supervisor:
Street Address	Hours Worked Per Week:	Date Started: (mm/yyyy) /	Date Ended: (mm/yyyy) /
City	State / Province	Zip / Postal Code	Starting Salary: Ending Salary:
Brief description of your role/responsibilities:		Reason for leaving:	

Have you ever been Self employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide details:
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Please attach your personal resume and that of your spouse if listed under 'SECTION 4' as a partner.

SECTION 4 – General Information

What level of commitment will you devote to your Barmetrix franchise? Full Time Part Time
 If part-time, please explain: _____

Will you have a partner (e.g. Spouse, friend, etc.)? Yes No
 If yes, name of partner: _____

Partner's level of involvement: Full Time Part Time Investment Only

If other individuals will be involved with you, list names, addresses and capacity of their involvement below:

(1) Name: _____ Address: _____ Capacity: _____
 (2) Name: _____ Address: _____ Capacity: _____
 (3) Name: _____ Address: _____ Capacity: _____

NB: If others are to be included on the Franchise Agreements, please have these individuals fill out a separate application.

SECTION 5 – Specific Information

Estimate minimum monthly income required for your current living expenses? \$ _____ per month.

Would this business be your sole source of income? Yes No

Own Home or Rent? _____ If Own, current value \$ _____

Please DO NOT combine (if applicable) non-spousal partner's financial information with your statement (below).

<u>Assets</u>	<u>Liabilities</u>
Cash on hand and in bank: _____	Mortgages: _____
Securities (shares, bonds, etc.) _____	Home (balance owing): _____
Home (market value): _____	Other Real Estate (balance owing): _____
Automobiles and Personal Property: _____	Loans: _____
Business Interests: _____	Notes Payable: _____
Other Assets: _____	Credit Cards: _____
	Line of Credit: _____
	Other Liabilities: _____
TOTAL ASSETS: _____	TOTAL LIABILITIES: _____
Total Assets: _____	
Total Liabilities: _____	
NET WORTH: _____	

If qualified, when would you be ready to start BARMETRIX?		
Location Preferences (City/Province)? 1.	2.	3.
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have any contingent liabilities for guarantees, endorsements, leases, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you or any company you have owned or managed ever gone through bankruptcy or compromised a debt? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you now, or have you ever been party to any lawsuit – either as defendant or plaintiff? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of any offense (including misdemeanors for which you were fined \$200 or more)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

NB: If you answered yes to any of the above questions, please explain below or on a separate piece of paper.

SECTION 6 – Personal References (Other than employers or relatives)

(1) Full Name: _____	Address: _____	Occupation: _____	Phone: _____
(2) Full Name: _____	Address: _____	Occupation: _____	Phone: _____
(3) Full Name: _____	Address: _____	Occupation: _____	Phone: _____

SECTION 7 – Other Comments

How do your spouse and family feel about your being in business for yourself?	
Describe your attributes that you feel would contribute to your success in this business venture?	List what areas you feel will need strengthening in order to succeed in this venture?

Acknowledgement and Consent

For the purposes of a BARMETRIX franchise and other considerations, the undersigned acknowledges that the forgoing statement and information fully and truthfully sets forth the accurate financial condition of the undersigned on the date set out below.

The undersigned further acknowledges as part of the selection process that an investigation may be made with respect to the undersigned's credit status, character, general reputation, personal characteristics and mode of living. I hereby consent to BARMETRIX, its affiliates or their respective agents to conduct an investigation to obtain the above information.

DATED this day of year .

Applicant's Signature: _____ Print Name: _____

Spouse's Signature (if applicable): _____ Print Name: _____
(Required whether or not the spouse will be committing to the business)

Witness' Signature: _____ Print Name: _____

