



# Mystique Tanning

Mystic Spray & Tanning

[www.mystiquetanning.com](http://www.mystiquetanning.com)

Fax (780) 475-1175

## Potential Franchisee Application Form

### PERSONAL DATA:

Name:

Address:

City:

Prov./ State:

Postal/Zip Code:

Country:

Home Phone: ( )

Daytime Phone: ( )

Are you of legal age in your Prov./ State to operate a business? **YES NO**

How many years at current address? **Own / Rent**

Previous address: (if current in less than 3 years):

### EDUCATIONAL BACKGROUND DATA:

High School:

City:

Prov./ State:

Years:

College:

City:

Prov./ State:

Years:

Degree:

### EMPLOYMENT DATA:

Your Current Employer's Company Name:

Type of Business:

Employers Address:

Occupation and Title:

Salary per Year:

How long at current job?

Have you ever been bonded? **YES NO** Amount?

Have you ever declared bankruptcy?

Have you ever owned a small business? **YES NO**

If yes, please provide a brief description of your business:

Have you ever owned a franchise? **YES NO** If yes, which one:

Do you own this franchise today? **YES NO**

Are you or have you ever been involved in the tanning business? **YES NO** If yes, please explain:

Please provide a brief employment history, including significant jobs prior to your present situation:

### FINANCIAL DATA (Personal):

Total Assets: \$

Total Liabilities: \$

**Net Worth:** (Your Assets Less Liabilities) \$

How much cash do you have readily available to invest in your own **Mystique Tanning Salon®** business?

What sources of additional cash, if needed, are available to you?

Source: Amount:

Source: Amount:

Additional income (ie: pensions, trusts, investments, etc.) in the amount of \$ (per year)

Source(s):

Do you have any judgments or liens outstanding? **YES NO** If yes, explain:

Have you or any company that you have ownership in ever filed a petition for bankruptcy or made an assignment for the benefit of creditors? **YES NO**

Have you any lawsuits pending against you? **YES NO** If yes, explain:

Do you agree to a credit check on your financial status? **YES NO** If no, explain:

**AWARENESS OF Mystique Tanning Studios®:**

How did you learn about **Mystique Tanning®** ?:

Are you a customer of **Mystique Tanning®**? **YES NO**

What studio did you attend?

**INTENTIONS REGARDING STUDIO'S OPERATION:**

When do you wish to open a **Mystique Tanning Salon®**? (date):

Would your **Mystique Tanning Salon** be your primary source of income?

Do you intend to work in your studio full-time(operator) or just be an owner?

Would your spouse help you operate your studio?

Would you have a business partner?

If yes, please state their name:

Are you interested in being a single studio owner or a multiple studio owner?

*Please Note: **Mystique Tanning Salon®** must have a questionnaire from each member of the partnership*

**ADDITIONAL DATA:**

Why would you like to own and operate your own business?

Why do you think you would be successful as a **Mystique Tanning Salon®** owner?

List in order of preference the towns or cities you are considering for your **Mystique Tanning Salon®** location.

- 1.
- 2.
- 3.

I/We do hereby represent that all of the above answers are true and complete to the best of my/our knowledge and belief. I/We recognize that **Mystique Tanning®** is not in any way Obligated to franchise an agency to me/us because of our execution of this document. I/We acknowledge that any false statement on this application shall be considered sufficient cause to deny further consideration. I/We understand that an injury regarding my/our character, general reputation, personal characteristics, mode of living, and financial background may be made as a result of this application and hereby authorize the release of this information to **Mystique Tanning®**

A photographic copy of this authorization shall be valid as the original.

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Signed \_\_\_\_\_

Date \_\_\_\_\_