



REVOLUTION CD FRANCHISE APPLICATION FORM

The information contained in this form once filled out is **strictly confidential**. This application does not represent a legal contract nor does it bind either party in any manner.

Please use additional paper as necessary and attach a recent photograph to your application before sending it to: Revolution CD Head Office, 49 Monaro St Queanbeyan NSW 2620. You will be contacted shortly after we receive and review your application.

PERSONAL DETAILS:

A. Please provide personal details as follows:

Name of applicant/s: _____

Personal Address: _____

Telephone: Bus. _____ A/H _____

E-mail address: _____

Drivers Lic. No. _____ State _____

Date of Birth: _____

Marital Status: _____

B. Please list any physical or mental conditions that may effect the successful management of the franchise:

C. Please give details of any convictions or legal proceedings you have been involved in and the outcome of these:

OCCUPATIONAL EXPERIENCE:

A. Please list any qualifications or former experience you have in the field of retail, entertainment products or business management:

1.

2.

3.

4.

5.

B. Please provide business details below.

Business/Company Name if applicable: _____

ABN or A.C.N: _____

Proposed business structure: _____
(eg. Sole trader, partnership, Pty Ltd company)

C. Please give additional details of any other persons who will have part ownership over the Franchise:

Name _____ D.O.B. _____

Experience _____

Telephone Bus. _____ A/H _____

Name _____ D.O.B. _____

Experience _____

Telephone Bus. _____ A/H _____

D. Please list the last 3 occupations you have held, including your position, name of company, type of business, length and time of employment, the reason you left and a contact name and number at the business.

Position: _____

Company: _____

Industry: _____

Time there: _____

Reason for leaving: _____

Contact Person : _____

Telephone: Bus. _____ Fax. _____

Position: _____

Company: _____

Industry: _____

Time there: _____

Reason for leaving: _____

Contact Person : _____

Telephone: Bus. _____ Fax. _____

Position: _____

Company: _____

Industry: _____

Time there: _____

Reason for leaving: _____

Contact Person : _____

Telephone: Bus. _____ Fax. _____

E. Please list any previous experience you have in the field of music CDs, console games, DVDs, PC Games or related merchandise:

FINANCIAL & LEGAL INFORMATION:

A. Please provide the following accounting information:

Accountant: _____

Address: _____

Telephone Bus. _____ Fax. _____

B. Please provide the following legal information:

Solicitor: _____

Address: _____

Telephone Bus. _____ Fax. _____

C. Please provide the following financial information:

Financial Institution: _____

Address: _____

Telephone Bus. _____ Fax. _____

D. Please list your assets and liabilities, giving the total values for each.

Assets:

OPERATIONAL INFORMATION:

A. Have you ever operated your own business? If yes, give details as to the nature of the business, the length of time you owned the business and what happened to the business.

B. Please list 3 references:

Personal Character Reference

Name: _____ Contact Number: _____

Family Member Reference

Name: _____ Contact Number: _____

Financial Reference

Name: _____ Contact Number: _____

C. How do you plan to finance a Revolution CD franchise?

D. What attributes do you feel you possess that would help your success in a Revolution CD franchise?

E. Are you aware that we are unable to guarantee the success of a Revolution CD franchise, despite our excellent production and profitability of current stores?

F. How do you plan to overcome any unexpected losses as the business grows?

G. Do you have an understanding of how a franchise works and what is expected of a Franchisee? Please explain your understanding of these matters.

H. Is there any other information you feel we should know about you when considering your application?

I. Please sign and date the following:

I/We _____

of _____

have answered the above questions to the best of my/our ability and certify that the information contained in this application is accurate. I/We understand that Revolution CD Pty Ltd may contact an appropriate third party to confirm the information contained herein and do consent to this action if deemed necessary by Revolution CD Pty Ltd. I/We understand that this information will be relied upon by Revolution CD when considering my/our suitability in becoming a Revolution CD Franchisee.

Signed on this _____ day of _____ 200 ____

Signature of applicant

Signature of additional applicant