

## **P&P ICE CREAM ENTERTAINMENT LTD**

## FRANCHISE APPLICATION FORM

Thank you for your interest in PAPAFiLiPOU cafe mediterenean experience.

1. Please enter all relevant details needed

2. In case you want to provide any additional information, please attach a separate sheet

3. Attach your current updated CV and business card along with this application form

PLEASE WRITE IN BLOCK CAPITALS

How did you hear about us?

Are you interested in a new or existing location?

Please list the address of the existing location of your interest?

How much time will you devote to the business?

If not you, who is going to run the business (attach his/hers updated CV)

Do you have any previous restaurants or food experience?

If YES, give details:

# Section I: Personal Fact Sheet

Title (Dr/Mr/Mrs/Miss/Ms):
Full Name:
Address :
Telephone no.:
F-mail:
Town:Country: Telephone no.:Mobile no.: E-mail: Date of birth:Gender: Male Female I Identity card number:
Identity card number:

 $1. \ Educational \ Qualifications \ (beginning \ with \ the \ most \ recent):$ 

Qualifications	Graduation	Name of Institution

2. Business Experience Current Employer:.....No.Years: .....No.Years: ..... Title:.... Explain Dutties and Responsibilities: ....

Previous Experience	Employer/Organization Name	Title	Responsibilities
to			
to			
to			
. Does your professional ba	ckground involve any of the following? (please tick t	he appropriate bo	ox)
1. Marketing/Sales	4. Software/Har	dware/IT	
2. Education/Training	5. Profit Center	Management	
3. Small business Mgmt	6.0ther (specify	)	
. Are you currently associat	ed with any professional group/association?	Yes	No

	if yes, give details:	
~	Your social status:	
5.	Your social status:	
	a) Any prior criminal record?	Yes No
	b) Are any criminal proceedings pending against you in any courts?	Yes No
	if yes in any of the above please give details:	
	(Please attach copy of your certificate of no criminal conviction)	

#### 6. References

Please list three personal references whom we can contact

Years known	Name	Phone no.	Address

### Section II: Business Information

Company Name:	
Company Name: Company Registration Number: Address :	VAT Number:
Address ·	
1140 000	
Town: Telephone no.: E-mail:	Mobile no ·
F-mail·	
Website: www	
websue. www	

# Section III: Financial Information

Confidential Information - please attach		
Certificate of Registration	Business Plan	
Certificate of Shareholders	Financial Resources	
Certificate of Directors	Other businesses	
Audited Financial Statement /Profit & Loss/Balance Sheet		 

Privacy Policy: The personal information you provide as part of your application may be shared with companies affiliated with us, vendors and partners as necessary for those companies, vendors and partners to perform business functions, such as fulfilling orders, assisting with promotions, providing marketing or advertising services, providing technical services etc. Except as described in this provicy policy P&P Ice cream Entertainment ltd does not sell, transfer of disclose information to third parties

I certify that the information provided above is true and correct. I auhorise P&P ice cream entertainment ltd to verify the information I have provided on this and any attached forms including. I hold the franchisor, its affiliates, agents and employees harmless for any damages or liability arising either from the receipt or use of any information obtained through this sources I have provided.

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Signiture

Full Name

Date

.....

for internal use

