



# Franchise Initial Inquiry Form

(Please type or print neatly in dark ink)

Full Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Provincial Address: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Mobile No./s \_\_\_\_\_

Office Tel: \_\_\_\_\_ Fax No: \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Civil Status: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse Occupation: \_\_\_\_\_

## EDUCATIONAL ATTAINMENT \_\_\_\_\_

## CURRENT WORK/ BUSINESS EXPERIENCES

(Please indicate work or business/es currently operating and those, which closed, if any, within the past 5 years.)

Business/ Company Name	Address	Position	Date Started
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What area or towns would you like to open a **GOTO KING Franchise**?

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

Which **GOTO KING** Store Type are you interested in?

\_\_\_ **Independent** (70 – 150 sq m) \_\_\_ **Food Court** (25 -40 sq m) \_\_\_ **Kiosk** (6-15 sq m)

How did you know about the **GOTO KING Franchise Opportunity**?

- \_\_\_ Internet/ Website
- \_\_\_ Referral from Family/ Friend/ Acquaintance
- \_\_\_ Referral from GK Franchisee

- \_\_\_ Store Ads
- \_\_\_ Franchise Expo
- \_\_\_ Others: (Pls.specify) \_\_\_\_\_