

Franchise format interested in	Kids' Gallery Creative Arts	Kids' Gallery Workshops	Star English
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A. Particulars of Applicant

Name: _____

Address: _____

City: _____ Postal code: _____

Tel: _____ (Home) _____ (Office)

_____ (Mobile)

Fax: _____ Email: _____

Citizenship _____ Age: _____

Marital status: Married Single

Number of children: _____ Ages: _____

Highest educational level: _____

Qualifications: _____

Have you ever been convicted of anything other than minor traffic violations:

Yes No

Have any judgements been entered against you or a business you control or did control?

Yes No

Have you ever declared personal or business bankruptcy?

Yes No

If yes to any of the above, please provide further details.

B. Employment History

Please state your employment history in chronological order with most current first.

Employer	Position	Date

Have you ever been involved in the running of a business, directly or indirectly? If yes, please provide details of business concern.

C. Financial Information

Level of available funds for investment in this business.

US\$100,000 - 200,000

US\$200,000 - 300,000

US\$300,000 - 500,000

Name of main bank: _____

Address: _____

Tel: _____

The KG Group will rely on the following information to analyse your qualifications and to better assist you in your exploration of the franchise opportunity. The submission of this information places no continuing obligation on either you or the KG Group. All information provided will be used solely in the evaluation of your suitability as a franchisee. Please call KG Partnerships at +852 2501 4842 if you have any questions.

D. Business Interest

Please state your level of interest.

Centre Area Country

Please indicate the region/country/city that you are interested in.

Do you presently own/possess premises which may be suitable for a KG Group centre?

Are you or any potential partners involved, directly or indirectly, with any businesses related to children locally or internationally? If yes, please provide details.

Do you have any other businesses which you are currently investing in? If yes, please elaborate.

E. Others

How involved will you be in the running of this business?

Full-time Part-time

Will there be other partners in this business venture? If yes, please list their names and background.

How did you get to know about this franchise opportunity?

Referral Internet Government agencies
 Exhibitions Magazines Brochures
 Others - please specify

Please attach any additional information you believe we should have to support your application.

I hereby certify that to the best of my knowledge, information and belief, the above statements are true and accurate. Should I continue pursuing a KG Group franchise, I shall provide additional and more complete information as requested.

Applicant's signature:

Date:

Please send this completed form to:

KG Partnerships
 KIDS' GALLERY INTERNATIONAL LTD
 21/F Coda Plaza, 51 Garden Road, Central, Hong Kong

Tel: +852 2501 4842
 Fax: +852 2501 4095
 Email: franchise.info@the-KGGroup.com