

Franchisee Initial Enquiry Application Form

YEMAYA FRANCHISEE INITIAL ENQUIRY APPLICATION FORM				
Name		Surname		
Contact #		Cell #		
Physical Address:		Postal Address:		
ID Number		E-mail address:		
Where did you find	Please tick the correct option below:			
out about this opportunity?	Word of Mouth			
	Website			
	Publication			
	Other			
ARE YOU CURRENTLY EMPLOYED?				
Employer:				
Position / Occupation	on:			
Years employed:				
WHAT IS YOUR BACKGROUND?				
Provide a brief synopsis of your background				

Annexure 1A © Yemaya



QUESTIONS	ANSWERS
Are you going to pursue this opportunity on a full time basis?	
In which area are you interested in opening a Yemaya franchise?	
Why are you interested in a Yemaya franchise?	
What do you know about Yemaya?	
Do you have any experience in the health and beauty industry?	
What business and/or management skills do you have that would make you a successful franchisee?	
What unencumbered cash contribution do you have on hand to invest in a Yemaya franchise?	
Name:	Date:
Signed:	

Thank you for your interest in a Yemaya Express Nails Franchise opportunity.

Please return the application form to: email: jill@yemaya.co.za OR info@yemayaexpress.co.za

Annexure 1A © Yemaya