



Spill it! Tell us your tuckin' story.

First Name: _____ Middle Initial: _____ Last Name: _____

Gender: _____ Date of Birth: _____ Marital Status: _____

U.S Citizenship (Y/N): _____ Phone Number: _____

Email Address: _____

Street Address: _____ City: _____

State: _____ Zip Code: _____

Desired Opening Date: _____

How long have you lived in this city? _____

About You:

How did you hear about this tuckin' amazing franchising opportunity with Studio Barre?

Why are you interested in opening a Studio Barre franchise? We already know it's awesome, so tell us something else.

Have you tucked with us? Please list your Barre know-how and studios you've attended:

Please list your fitness teaching experience (if any):



What background do you possess that makes you feel qualified and ready to open a Studio Barre?

If you are currently or ever were a Barre teacher, have you signed a non-competition agreement that precludes you from opening a franchise in your desired market?

Market:

Market Preference (Neighborhood, City, State, Zip Code, County):

Do you plan to live in your market full time?

How far is your primary residence from your market preference?

Are you involved in the community in which you hope to open a franchise? Give us the details.

Ownership:

Do you plan to purchase the studio on your own or with a partner?

If you plan to have a partner, what is his/her name?



If you plan to have a partner, will he/she be actively involved in the day-to-day operations or serve as a passive investor? Please explain. (Got a partner? Your partner must submit a separate application.)

If you plan to have a partner, what percent ownership will he/she have?

Operations and Management:

How active do you plan to be in the day-to-day operations of the studio?

Do you plan to hire a studio manager? If so, do you have someone in mind?

Do you plan to be a Master Teacher Trainer? If not, do you have someone in mind?

Do you have any other management experience in fitness? If so, where and dates worked.



Do you have any tuckin' questions for us? We're happy to answer anything you've got, so jot down your thoughts here (or you can draw us a pretty picture):

Please submit your resume with this application. Please note, if forming a partnership, each active partner must submit a separate application and resume.

Signature (applicant)

Date

Print Name

To submit this application please email to franchising@studiobarre.com



Or mail to: 7720 El Camino Real Suite E Carlsbad, CA 92009