

Classic Photo Booths

**APPLICATION FORM
OWNER/OPERATOR OF CLASSIC PHOTO BOOTHS**

**Classic Photo Booths Ltd
hello@classicphotoboosth.co.nz
www.classicphotoboosth.co.nz
Telephone: 0800 746 862**

This form should be completed by the main applicant. If you expect to run the business with a business partner/partner/spouse we may ask you to provide their details on a separate form.

Preferred Region: _____

(Suburb) City: _____

1) PERSONAL INFORMATION

Title: _____

Name: _____

Address: _____

Mobile phone: _____

Email Address: _____

Telephone (Home): _____

Date of Birth: _____

Nationality: _____

Marital Status: _____

Number of Dependants: _____

2) EDUCATION & TRAINING

Give details of any relevant educational, training and professional qualifications attained.

Start Date	Stop Date	Course and Description

3) WORK & WORK RELATED EXPERIENCE

Please give details of your work related experience to date. Include both full-time and part-time and periods of self employment.

Start Date	Stop Date	Job Title	Company Name and Role Description

Classic Photo Booths Limited

Postal: Classic Photo Booths Ltd, PO Box 149, Akaroa 7542, New Zealand. Web: www.classicphotoboosth.co.nz Email: hello@classicphotoboosth.co.nz

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4) YOUR BUSINESS INTERESTS

List all Businesses which you have financial interests.

Business Name	Position	Brief Description of Involvement

5) REGISTER OF POTENTIAL CONFLICT OF INTEREST

If there is a potential conflict of interest, or known conflict of interest, where the applicant or business partner/partner/spouse have multiple interests including any potential competitors to Classic Photo Booths, then this information must be disclosed.

Competition means working for a company engaged in, or engaging in self-employment in photography, video or photo booth operations; or providing services similar to those provided by Classic Photo Booths.

Register of Interests

Names of parties	Nature of potential conflict

4) LEGAL INFORMATION

Have you any criminal convictions or prosecution(s)? YES NO

Have you been bankrupt or insolvent; if so, give details: YES NO

Do you have any objection to us making credit checks? YES NO

5) PLEASE INDICATE WHERE YOU FOUND OUT ABOUT THIS OPPORTUNITY

Website Facebook Advertisement

Friend Press Article Other

If other, please specify

6) YOUR ABILITIES & AVAILABILITY

How much of your own funds will you be able to invest in this business?

Do you have any relevant photography, video or technology experience?

Do you have any customer service experience?

Are you available to operate photo booths at any time including week days, weekends, and public holidays?

Do you own your own vehicle?

Explain why you are interested in being a Classic Photo Booth owner/operator

7) DECLARATION

I certify that the above information is correct and complete to the best of my knowledge.

I understand that Classic Photo Booths does not warrant or represent in any way that a particular level of income is attainable or guaranteed.

I understand that in order for my application to progress I will be required to sign a Non-Disclosure Agreement.

I understand that this is an application and is in no way intended as an offer or contract. The granting of an owner/operator agreement is at the sole discretion of Classic Photo Booths Limited.

Signature: _____

Name: _____

Date: _____

Please complete this Application Form and email back to mark@classicphotoboosts.co.nz or post to:

**Mark Bamber,
Classic Photo Booths,
PO Box 149,
Akaroa 7542,
New Zealand**