



CONFIDENTIAL PROSPECTIVE FRANCHISEE INFORMATION FORM

Thank you for your interest in opening a Vintner's Circle franchise. This is not an offering; a franchise offering is made by prospectus only. However, in order to get started with the evaluation and licensing process, we ask that you take some time to complete this confidential information form. Please feel free to add your resume or any other supplements to this form if you desire. After we have received and reviewed your completed form, we will contact you and provide you with additional and appropriate information relative to your interest and we will outline what additional information we will need from you, if any.

Personal Data:

Name: _____
Date of Birth: _____ Social Security No. _____
Marital status: S _____ M _____ U.S. Citizen: Y _____ N _____
Address: _____
City, State and Zip Code: _____
Home Phone: _____ Work Phone: _____
E-mail: _____
Best time to contact: _____

Please briefly describe your current job:

Employer: _____ Address: _____
From/To: _____ Position: _____ Annual gross income: _____

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Employer: _____ Address: _____
From/To: _____ Position: _____ Annual gross income: _____

Do you have any experience (other than as a customer) with Vintner's Circle? If yes, please briefly describe:

Do you have prior experience in the bar or restaurant industry? If yes, please briefly describe:

Do you have prior experience in the wine industry? If yes, please briefly describe:

If you are married, does your spouse intend to be active in the business? If so, please briefly describe his/her current job, prior business experience, and whether he/she has any prior experience in the food/wine/restaurant industry:

Have you ever owned your own business? If so, please briefly describe that business:

Partner (If any):

Do you expect to have a business partner or other equity partners? If yes, please briefly describe who he/she is, your relationship, and whether he/she will be a financial partner and/or an operational partner:

Name: _____
Date of Birth: _____ Social Security No. _____
Marital status: S _____ M _____ U.S. Citizen: Y _____ N _____
Address: _____
City, State and Zip Code: _____
Home Phone: _____ Work Phone: _____
E-mail: _____
Best time to contact: _____

Please briefly describe your partner's current job:

Employer: _____ Address: _____
From/To: _____ Position: _____ Annual gross income: _____

Employer: _____ Address: _____
From/To: _____ Position: _____ Annual gross income: _____

Employer: _____ Address: _____
From/To: _____ Position: _____ Annual gross income: _____

Please provide two business and two personal references. These people should not be family members. Please include contact information for these individuals:

Intentions and expectations

What areas or locations would you like to consider for establishment of a Vintner's Circle franchise? Please note areas in order of preference:

Do you plan to pursue other business interests while operating your Vintner's Circle franchise? If so, please briefly describe the other business you will pursue:

Would you be interested in opening more than one franchise at this time?

If awarded a franchise, would you manage it full-time? If not, who would?

How did you learn of our Vintner's Circle Franchise Offering?

What questions do you have about the Vintner's Circle Franchise Offering?

Funding

What is your approximate net worth?*

How much capital do you have available for investment?*

Cash _____ Other? _____

What will be your source of funds and will you need to secure financing for some or all of your investment?

Have you ever failed in business or filed bankruptcy??

How soon are you able and willing to acquire a franchise?

By submitting this Confidential Information Form, I/We do hereby certify that the above information is a true and accurate description of my/our financial and personal position. In supplying the foregoing information and references, I/We do so with the understanding that Vintners Circle Franchising LLC may, through its agents or employees, verify this information regarding my/our character, reputation, personal characteristics and financial data. I/We give Vintners Circle Franchising LLC authorization to make such inquiries of the persons or agencies listed herein and to obtain credit reports or other information from third parties to determine my qualifications.

Please sign and date:

Signature of primary applicant

Date

Signature of partner (if applicable)

Date

Your completion of this Confidential Information Form does not obligate you to Vintner's Circle Franchising LLC in any way. All information provided herein is confidential and will be used to help us evaluate you as a potential Vintner's Circle franchisee. This is not a contract. This form will be destroyed if you choose not to move forward with opening a Vintner's Circle franchise.

Thank you for completing this Confidential Information Form. Please fax this confidential form to the attention of David Schmeltzle, President and National Licensing Manager, 866-653-2045.